

HAL J. RASMUSSEN OPERATING, INC.
SIX DESTA DRIVE, SUITE 2700
MIDLAND, TEXAS 79705
(915) 687-1664

#9
OIL CONSERVATION DIVISION
RECEIVED

'90 OCT 10 AM 9 13

October 3, 1990

Mr. William J. LeMay, Director
New Mexico Oil Conservation Division
P. O. Box 2088
Sante Fe, New Mexico 87501

RE: Administrative Approval of an Unorthodox Well Location
State "A" a/c 3 # 6
Jalpat Gas Pool
Lea County, New Mexico

Dear Mr. LeMay,

Hal J. Rasmussen Operating Inc. respectfully requests administrative approval to recomplete the State A a/c 3 # 6 at an unorthodox well location, located 1980 ft FSL and 2310 ft FEL of Section 10, T23S R36E, Lea County, New Mexico. The State "A" a/c 3 # 6 is currently TA'd in the Langlie Mattix Pool.

The offset operators have been notified of this application by certified mail. Copies of the return receipts will be forwarded when received. Attached is a plat showing the location of the State "A" a/c 3 # 6, and the proration unit the well will be included in. A list of offset operators has also been attached.

If you need any further information regarding this request, please call me at (915) 687-1664.

Thank-you for your consideration.

Sincerely,



Jay Cherski

CC: New Mexico Oil Conservation Division District 1 Office
P.O. Box 1980
Hobbs, New Mexico 88240

Submit to Appropriate District Office
 State Lease - 4 copies
 Fee Lease - 3 copies

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-102
 Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

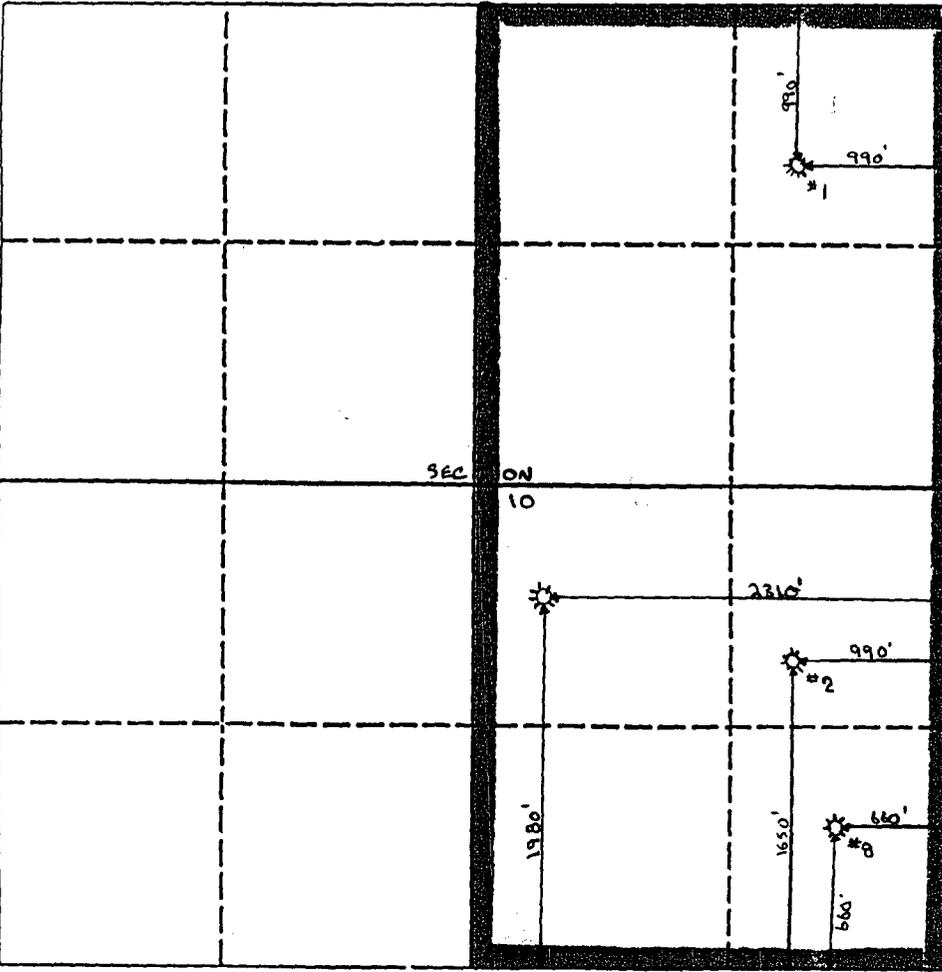
Operator Hal J. Rasmussen Operating, Inc.			Lease State A A/C 3		Well No. 6
Unit Letter J	Section 10	Township 23 S	Range 36E	County Lea	
Actual Footage Location of Well: 1980 feet from the SOUTH line and 2310 feet from the EAST line					
Ground level Elev.	Producing Formation TANSHIL-YATES		Pool Jalmat-TNSL-YTS-7R	Dedicated Acreage: 320 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

 Yes No If answer is "yes" type of consolidation _____

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary).

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



TEXAS

OPERATOR CERTIFICATION
 I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature: *Jay D. Cherski*

Printed Name: Jay D. Cherski

Position: Agent

Company: Hal J. Rasmussen Operating, Inc.

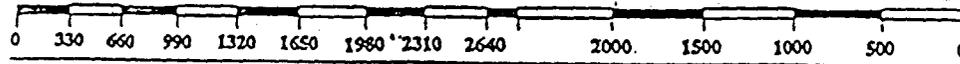
Date: 10/3/90

SURVEYOR CERTIFICATION
 I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed: _____

Signature & Seal of Professional Surveyor: _____

Certificate No. _____



Offset Operators

Texaco
Mr. Russell Pool
P.O. Box 728
Hobbs, New Mexico 88240



OIL CONSERVATION DIVISION
 STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
 OIL CONSERVATION DIVISION
 HOBBS DISTRICT OFFICE

90 OCT 12 AM 9 23

10-10-90

GARREY CARRUTHERS
 GOVERNOR

POST OFFICE BOX 1980
 HOBBS, NEW MEXICO 88241-1980
 (505) 393-6161

OIL CONSERVATION DIVISION
 P. O. BOX 2088
 SANTA FE, NEW MEXICO 87501

RE: Proposed:
 MC _____
 DHC _____
 NSL _____
 NSP _____
 SWD _____
 WFX _____
 PMX _____

Gentlemen:

I have examined the application for the:

Hal J. Rasmussen Operating Inc. State A A/C-3 #6-J 10-23-36
 Operator Lease & Well No. Unit S-T-R

and my recommendations are as follows:

OK

Yours very truly,

 Jerry Sexton
 Supervisor, District 1

/ed

OIL CONSERVATION DIVISION
RECEIVED

'90 OCT 25 AM 9 17

HAL J. RASMUSSEN OPERATING, INC.
SIX DESTA DRIVE, SUITE 2700
MIDLAND, TEXAS 79705
(915) 687-1664

October 22, 1990

Mr. Michael E. Stogner
Chief Hearing Officer/Engineer
Oil Conservation Division
P.O. Box 2088
Santa Fe, New Mexico 87504

Dear Mr. Stogner:

Enclosed are certified mail return receipts for the unorthodox location applications recently submitted on the State A Account 1 #54, #57, #65, #103, #122, State A Account 2 #72, #52, #45, #29, #67, State A Account 3 #6.

If you have any questions or need any further information please call Jay Cherski at 915-687-1664. Thank you for your consideration in this manner.

Sincerely,

HAL J. RASMUSSEN OPERATING, INC.

Nona Hopkins

Nona Hopkins
Secretary

/nh

Enclosures

<input checked="" type="checkbox"/>	<i>Unita Gonzales</i>
7. Date of Delivery	10-9-90

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

6. Signature - Agent	<input checked="" type="checkbox"/>
7. Date of Delivery	10-9-90

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Doyle Hartman
c/o Harold Swain
Drawerm.
Jal, New Mexico 98252

4. Article Number
P 046 612 028

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Clayton Watson*

7. Date of Delivery
10-10-90

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Lamarco
attn: Robert Lamford
P.O. Box 1206
Jal, New Mexico

4. Article Number
P 046 612 020

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Susan Chacon*

7. Date of Delivery
10-9-90 red

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Jahoe
attn: K. A. Freeman
4402 W. Industrial
Midland, Tx 79703

4. Article Number
P 046 612 022

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Deann Deomba*

7. Date of Delivery
10-9-90

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Arco
attn: Kevin Benfro
P.O. Box 1610
Midland, Tx 79702

4. Article Number
P 046 612 023

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Archie*

7. Date of Delivery
OCT 9 1990

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Marathon
attn: W.O. Snyder
Box 552
Midland Tx 79702

4. Article Number
P 046 612 025

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Armony Edwards*

7. Date of Delivery
OCT 9 1990

8. Addressee's Address (ONLY if requested and fee paid)

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Grace Petroleum
P.O. Drawer 2358
Midland, Tx 79702

4. Article Number
P 046 612 027

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Edward Perry*

7. Date of Delivery
OCT 9 1990

8. Addressee's Address (ONLY if requested and fee paid)

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Conoco
attn: Bob Kiker
10 Hesta Drive
Midland, Tx 79705

4. Article Number
P 046 612 019

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X

6. Signature - Agent
 X *Anita Gonzales*

7. Date of Delivery
10-9-90

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Meridian
attn: Jim Cramer
21 Hesta Drive
Midland, Tx 79705

4. Article Number
P 046 612 024

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
 X *Phood*

6. Signature - Agent
 X

7. Date of Delivery
10-9-90

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
C. E. Long
301 N. Colorado
Midland, Tx 79701

4. Article Number
P 046 612 029

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
X

6. Signature - Agent
X *Randy Briggs Ste. 160*

7. Date of Delivery
2-9

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Cherrow
attn: Al Bowling
P.O. Box 1150
Midland Tx 79702

4. Article Number
P 046 612 018

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
X

6. Signature - Agent
X *Al Bowling*

7. Date of Delivery
OCT 9 1990

8. Addressee's Address (ONLY if requested and fee paid)

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Jefaco
Russel Pool
P.O. Box 730
Hobbs, New Mexico 88240

4. Article Number
P 046 612 021

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
X *SDH...*

6. Signature - Agent
X

7. Date of Delivery
10-11-90

8. Addressee's Address (ONLY if requested and fee paid)

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Dallas Mc Cardana
90 Oil Reports & Gas Services Inc.
P.O. Box 763
Hobbs, New Mexico 88240

4. Article Number
P 046 612 026

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address
X *D. Williams*

6. Signature - Agent
X

7. Date of Delivery
10-12-90

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT