•	,					
	11/00	SUSPENSE 1/31/00				YPE DHC
	· /		ABOVE THIS LINE FOR DIVISION USE ONLY			
			OIL CONSERVAT - Engineering Bureau -		N	9611
<u> </u>		ADMINISTRATI	/E APPLICATION	NCOVERSH	HEET	
	THIS COVERSH	EET IS MANDATORY FOR ALL ADMI	NISTRATIVE APPLICATIONS FOR EX	CEPTIONS TO DIVISION I	RULES AND R	EGULATIONS
Application	[PC-I	[DD-Directiona wnhole Commingling] [0 Pool Commingling] [0LS [WFX-Waterflood Expa [SWD-Salt Water	Proration Unit] [NSL-No I Drilling] [SD-Simultane CTB-Lease Comminglin S - Off-Lease Storage] [ansion] [PMX-Pressure I Disposal] [IPI-Injection acovery Certification] [PI	eous Dedication] g] [PLC-Pool/Lea OLM-Off-Lease Maintenance Exp Pressure Increas	ase Comr Measuren ansion] se]	nent]
[1] T	YPE OF AF [A]		k Those Which Apply Init - Directional Drill		<u>jan</u> i	
	Check [B]	One Only for [B] and Commingling - Stora DHC CTB			ONSERVA	TON DIVISION
	[C]	Injection - Disposal	- Pressure Increase - E		Covery PPR	
[2] N	OTIFICAT [A]		D: - Check Those Whi or Overriding Royalt			ot Apply
	[B]	Offset Operators,	Leaseholders or Surfa	ice Owner		·.
	[C]	Application is Or	e Which Requires Pul	olished Legal N	otice	
	[D]		or Concurrent Approv nagement - Commissioner of Publi			
	[E]	For all of the abo	ve, Proof of Notificati	on or Publicatio	on is Atta	ached, and/or,
	[F]	Waivers are Atta	ched			

[3] INFORMATION / DATA SUBMITTED IS COMPLETE - Statement of Understanding

I hereby certify that I, or personnel under my supervision, have read and complied with all applicable Rules and Regulations of the Oil Conservation Division. Further, I assert that the attached application for administrative approval is accurate and complete to the best of my knowledge and where applicable, verify that all interest (WI, RI, ORRI) is common. I understand that any omission of data, information or notification is cause to have the application package returned with no action taken.

Note: Statement must be completed by an individual with supervisory capacity.

Deborah Moore (281) 293	-1005	Kleborah Mor Regulatory Analyst
Print or Type Name	Signature	Title

1/7/00 Date

DISTRICT I 1625 N. French Dr., Hobbs, NM 88240 1625 N. French DL, House, NM 88210 DISTRICT II 811 South First St., Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 <u>DISTRICT IV</u> 2040 S. Pacheco, Santa Fe, NM 87505

4. Method of Production

State of New Mexico Energy, Minerals and Natural Resources Department **OIL CONSERVATION DIVISION**

Form C-107-A Revised August 1999 APPROVAL PROCESS

_Administrative ____Hearing

Flowing

2040 S. Pacheco Santa Fe, New Mexico 87505-6429

EXISTING WELLBORE _X_YES __NO

APPLICATION FOR DOWNHOLE COMMINGLING

Conoco Ind) .	P.O.	Box 2197	Houston,	ΤХ	77252-2197		
Operator				Ade	dress	26		
Jicarilla E			8	С,	Sec. ²	15, T27N, R4W	Rio Ar	iba
Lease	, , ,		Well No.	Unit	t Ltr Se	c - Twp - Rge	County	
OGRID NO	005073 Pro	operty Code	18022	API_NO	:	30-039-20080	X	s: (check 1 or more) _, (and/or) Fee
「いい」と言語は「読録」	g facts are submitte ownhole comminglin	d'in I9	Upp Zon	er		Intermediate		Lower Zone
1. Pool Nan Pool Co		Blar	nco Mesaverde	72319	W	ildhorse Gallup 87360	Basin Dakota	71599
2. Top and Pay Se	Bottom of ction (Perforations	558	8 – 5758		7'	168 – 7182	7648 – 7692	
3. Type of p (Oil or	production Gas)	Gas	;		G	as	Gas	•

(Flowing of Artificial Elit)				
5. Bottomhole Pressure	a. ^{(Current) 578}	a. 310	a. 605	
Oil Zones - Artificial Lift: Estimated Current Gas & Oil - Flowing: All Gas Zones: Estimated Or Measured Original	b. ^(Original) 1468	ь. 1820	b. 2675	
6. Oil Gravity (EAPI) or Gas BTU Content	1300	1260	1315	
7. Producing or Shut-In?	or Shut-In? Producing		Producing	
	No	No	No	
Production Marginal? (yes or no)	Date:	Date:	Date:	
 If Shut-In, give date and oil/gas/ water rates of last production 	Rates:	Rates:	Rates:	
Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data	Date: Est. 10/99	Date: Est. 10/90	Date: Est. 10/99	
 If Producing, give date andoil/gas/ water rates of recent test (within 60 days) 	Rates: 41 mcfd, 0.1 bopd, 1 bwpd	Rates: 123 mcfd, 0.4 bopd, 0 bwpd	Rates: 79 mcfd, 0.4 bopd, 0 bypd	
 Fixed Percentage Allocation Formula -% for each zone (total of % for each 100%) 	Oil: 15 % Gas: 2 %	Oil: 54 % Gas: 32 %	Oil: 31% Gas. 66 %	

Flowing

If allocation formula is based upon something other than current or past production, or is based upon some other method, submit attachments with supporting data and/or explaining method and providing rate projections or other required data. 9 Yes _ 10. Are all working, overriding, and royalty interests identical in all commingled zones? If not, have all working, overriding, and royalty interests been notified by certified mail? No X

Yes No Will cross-flow occur? <u>X</u> Yes ____No If yes, are fluids compatible, will the formations not be damaged, will any cross-flowed production be recovered, and will the allocation formula be reliable. <u>X</u> Yes ____No (If No, attach explanation) 11. Will cross-flow occur?

12. Are all produced fluids from all commingled zones compatible with each other?	<u> X Yes </u>	No
Je a company of the c		_ 110

13. Will the value of production be decreased by commingling?	Yes XNo	(If Yes, attach explanation)
To: This are value of production be decredeed by containing mig.		(in 100, attaon explanation)

14. If this well is on, or communitized with, state or federal lands, either the Commissioner of Public Lands or the United States Bureau of Land Management has been notified in writing of this application. X Yes No

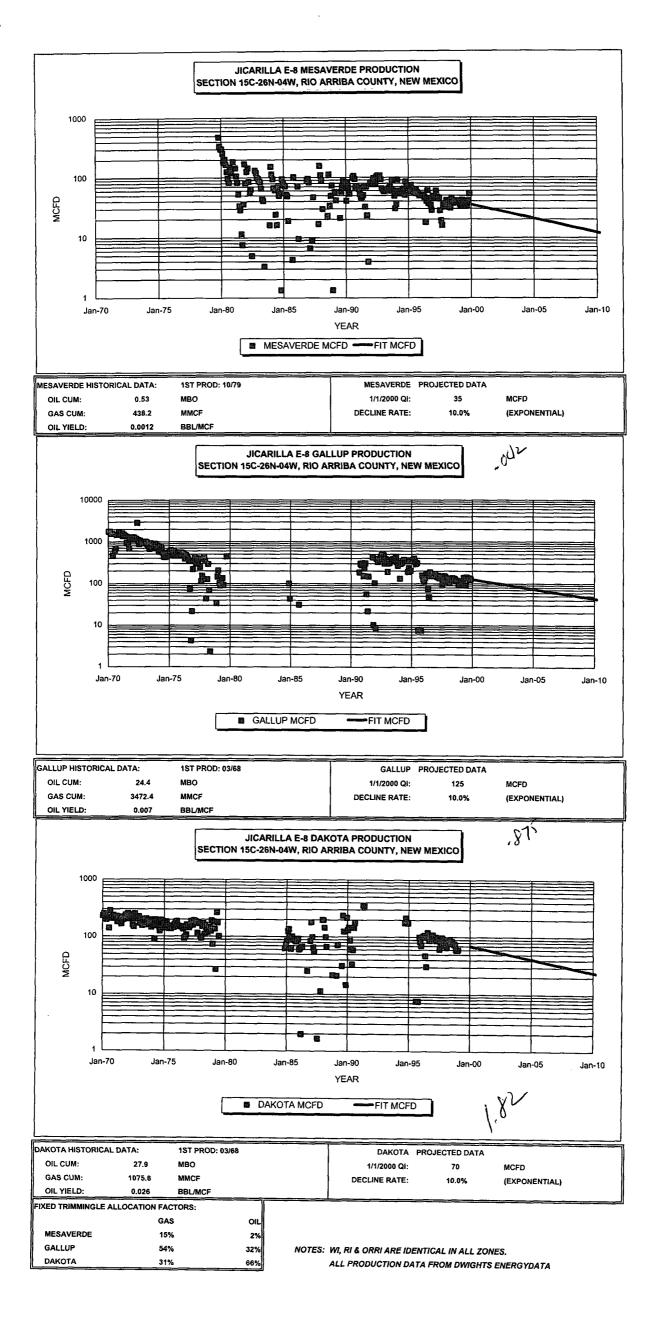
ORDER NO(S). 15. NMOCD Reference Cases for Rule 303(D) Exceptions:

Flowing

16. ATTACHMENTS:
* C-102 for each zone to be commingled showing its spacing unit and acreage dedication.
* Production curve for each zone for at least one year. (If not available, attach explanation.)
* For zones with no production history, estimated production rates and supporting data.
* Data to support allocation method or formula.
* Notification list of working, overriding, and royalty interests for uncommon interest cases.
* Any additional statements, data, or documents required to support commingling.

	,,		g.	
l hereby certify that the in	formation above is true	e and complete to the be	est of my knowledge and b	belief.
	borah A	() DO COITLE	Regulatory Analyst	DATE //7/00
	Deborah Moore	ζ.		
TYPE OR PRINT NAME			TELEPHON	NE NO.(281)293-1005

.(_201) 293-1003



District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 2040 South Pacheco, Santa Fe, NM 87505

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State of New Mexico Energy, Minerals & Natural Resources

Form C-102 Revised March 17, 1999

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe. NM 87505

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

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		1	² Pool Code			' Pool Nam	ne			
30-039-20080 72319 / 87360 / 71599 Blanco Mesaverde, Wildhorse Gallup, Basin Dakot						akota				
⁴ Property Code					⁵ Property N		⁶ Well Number			
18022				Jicarilla E					8	
⁷ OGRID N	0.	<u></u>		⁸ Operator Name					[°] Elevation	
005073					Conoco I	nc.				
.					¹⁰ Surface	Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
C	15	2/N	4W		1190	North	1480	West	Rio Arriba	
		<u>− 3/6</u> / _	¹¹ Bo	ttom Hol	e Location If	Different From	n Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
¹² Dedicated Acres	¹³ Joint of	r Infill 14 Co	onsolidation	Code 15 Or	der No.		· · · · · · · · · · · · · · · · · · ·			
80/160	I									
00/100	1									

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	¹⁷ OPERATOR CERTIFICATION
	I hereby certify that the information contained herein is true and
	complete to the best of my knowledge and belief
1490'	
	Signature Aleral Dore
	Printed Name Deborah Moore
	Title Regulatory Analyst
	1/7/00
	 Date (/////O
	¹⁸ 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 belief.
	Date of Survey
	Signature and Seal of Professional Surveyer:
	Certificate Number

