

06/09/09

W. Jones

06/09/09

SWD

PKAA09110511659

ABOVE THIS LINE FOR DIVISION USE ONLY

827A

NEW MEXICO OIL CONSERVATION DIVISION
 - Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



30-025-34593
 Goodwin State #1
 HRC, Inc.
 131652

ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

[NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
 [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
 [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
 [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
 [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
 [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
 [A] Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP ☐ SD
- Check One Only for [B] or [C]
 [B] Commingling - Storage - Measurement
☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☒ SWD ☐ IPI ☐ EOR ☐ PPR
- [D] Other: Specify _____
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or ☐ Does Not Apply
 [A] ☐ Working, Royalty or Overriding Royalty Interest Owners
 [B] ☒ Offset Operators, Leaseholders or Surface Owner
 [C] ☒ Application is One Which Requires Published Legal Notice
 [D] ☒ Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
 [E] ☐ For all of the above, Proof of Notification or Publication is Attached, and/or,
 [F] ☐ Waivers are Attached
- [3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Larry R. Scott
 Print or Type Name

Larry R. Scott
 Signature

Consultant
 Title

6/9/09
 Date

lynxpet@leaco.net
 e-mail Address

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: _____ Secondary Recovery _____ Pressure Maintenance ☒ _____ Disposal _____ Storage
Application qualifies for administrative approval? _____ Yes _____ No
- II. OPERATOR: HRC, Inc.
ADDRESS: P.O. Box 5102, Hobbs, NM 88244
CONTACT PARTY: Gary Schubert PHONE: 575-393-3194
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? _____ Yes ☒ _____ No
If yes, give the Division order number authorizing the project: _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- *X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).
- *XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: Larry R. Scott TITLE: Consultant
SIGNATURE: *Larry R. Scott* DATE: 06-04-09
E-MAIL ADDRESS: lrsco@leaco.net
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: _____

III. WELL DATA

- A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

- B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;
- (3) The formation name and depth with expected maximum injection rates and pressures; and,
- (4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

OPERATOR: HRC, Inc.WELL NAME & NUMBER: Goodwin State No. 1WELL LOCATION: 330' FNL & 330' FWL
FOOTAGE LOCATIONUNIT LETTER DSECTION 6TOWNSHIP 19-SRANGE 37-EWELLBORE SCHEMATICWELL CONSTRUCTION DATA
Surface Casing

See Attached

Hole Size: 12 1/4" Casing Size: 8 5/8"Cemented with: 790 sx. or ft³Top of Cement: 0' Method Determined: Circ 213 sxIntermediate CasingHole Size: Casing Size: Cemented with: sx. or ft³Top of Cement: Method Determined: Production CasingHole Size: 7 7/8" Casing Size: 5 1/2"Cemented with: 400 sx. or ft³Top of Cement: 5350' Method Determined: CBLTotal Depth: 7510'Injection Interval5110 feet to 6040'

(Perforated or Open Hole; indicate which)

INJECTION WELL DATA SHEETTubing Size: 2 7/8" Lining Material: IPCType of Packer: Baker Model R or equivalentPacker Setting Depth: 5000'Other Type of Tubing/Casing Seal (if applicable): Additional Data

1. Is this a new well drilled for injection? Yes x No

If no, for what purpose was the well originally drilled? Goodwin Drinkard/Abo

producer

2. Name of the Injection Formation: San Andres, Delaware, Bone Springs

3. Name of Field or Pool (if applicable):

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used.

See Attached Schematic

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: Eumont Yates/Seven Rivers/Queen e

3700-4000' Goodwin Drinkard/Abo@6676-7510'

GOODWIN STATE NO. 1
FORM C-108 APPLICATION FOR AUTHORIZATION TO INJECT

VI. DATA ON WELLS IN THE AREA OF REVIEW

1. XTO ENERGY, INC.

Monument '36' State No. 1

384' FSL & 1216' FEL of Section 36, T-18S, R-36E

Spud: 1/27/1999 Elevation: 3752' KB TD: 7512'

14-3/4" Hole; 11-3/4" Csg. @ 425' w/300 sx. circulated

11" Hole; 8-5/8" Csg. @ 2852' w/900 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7283' w/710 sx.; TOC @ 2250'

Open Hole Completion: 7283'-7512'

Active Producer

2. XTO ENERGY, INC.

Monument '36' State No. 2

1632' FSL & 1298' FEL of Section 36, T-18S, R-36E

Spud: 4/07/1999 Elevation: 3742' GL TD: 7509'

11" Hole; 8-5/8" Csg. @ 1515' w/465 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7251' w/1470 sx.; TOC @ 820'

Open Hole Completion: 7260'-7509'

Active Producer

3. SAHARA OPERATING COMPANY

Indiana '1' No. 1

1682' FNL & 1975' FEL of Section 1, T-19S, R-36E

Spud: 6/08/1998 Elevation: 3738' GL TD: 7480'

12-1/4" Hole; 8-5/8" Csg. @ 1550' w/800 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7480' w/1530 sx. circulated

Perforations: 7459'-7468', 7472'-7476', 7276'-82', 7284'-88', 7292'-95', 7297'-

7302', 7307'-12', 7315'-22', 7326'-30', 7336'-42', 7353'-60', 7369'-73', 7378'-

90', 7404'-12', 7429'-41', & 7446'-47'

Active Producer

4. SAHARA OPERATING COMPANY

Indiana '1' No. 2

744' FNL & 1653' FEL of Section 1, T-19S, R-36E

Spud: 8/21/1998 Elevation: 3745' KB TD: 7480'

12-1/4" Hole; 8-5/8" Csg. @ 1593' w/790 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7205' w/1288 sx.; TOC @ 1330'

Open Hole Completion: 7205'-7480'

Perforations: 6566'-86', 6592'-97' and 6602'-17' Squeezed w/25 sx. Class 'C' cmt.

Active Producer

5. XTO ENERGY, INC.

Goodwin '10' State SWD No. 1

2160' FSL & 330' FWL of Section 31, T-18S, R-36E

Spud: 11/24/1999 Elevation: 3746' KB TD: 7794'

12-1/4" Hole; 8-5/8" Csg. @ 1298' w/605 sx. circulated

8-3/4" Hole, 5-1/2" Csg. @ 7792' w/2010 sx. circulated

Perforations: Abo from 7634'-59' and 7679'-99' Squeezed

Abo from 7383'-96' and 7575'-95'

CIBP @ 7350' w/35' cmt. cap.

PBTD: 7315'

Perforations: 5380'-84', 5420'-60', 5546'-64', 5864'-83', 6890'-6920', 6820'-32', 6842'-55', 6976'-96', and 7003'-47'

Active Salt (Produced) Water Disposal Well

VII. PROPOSED OPERATIONS

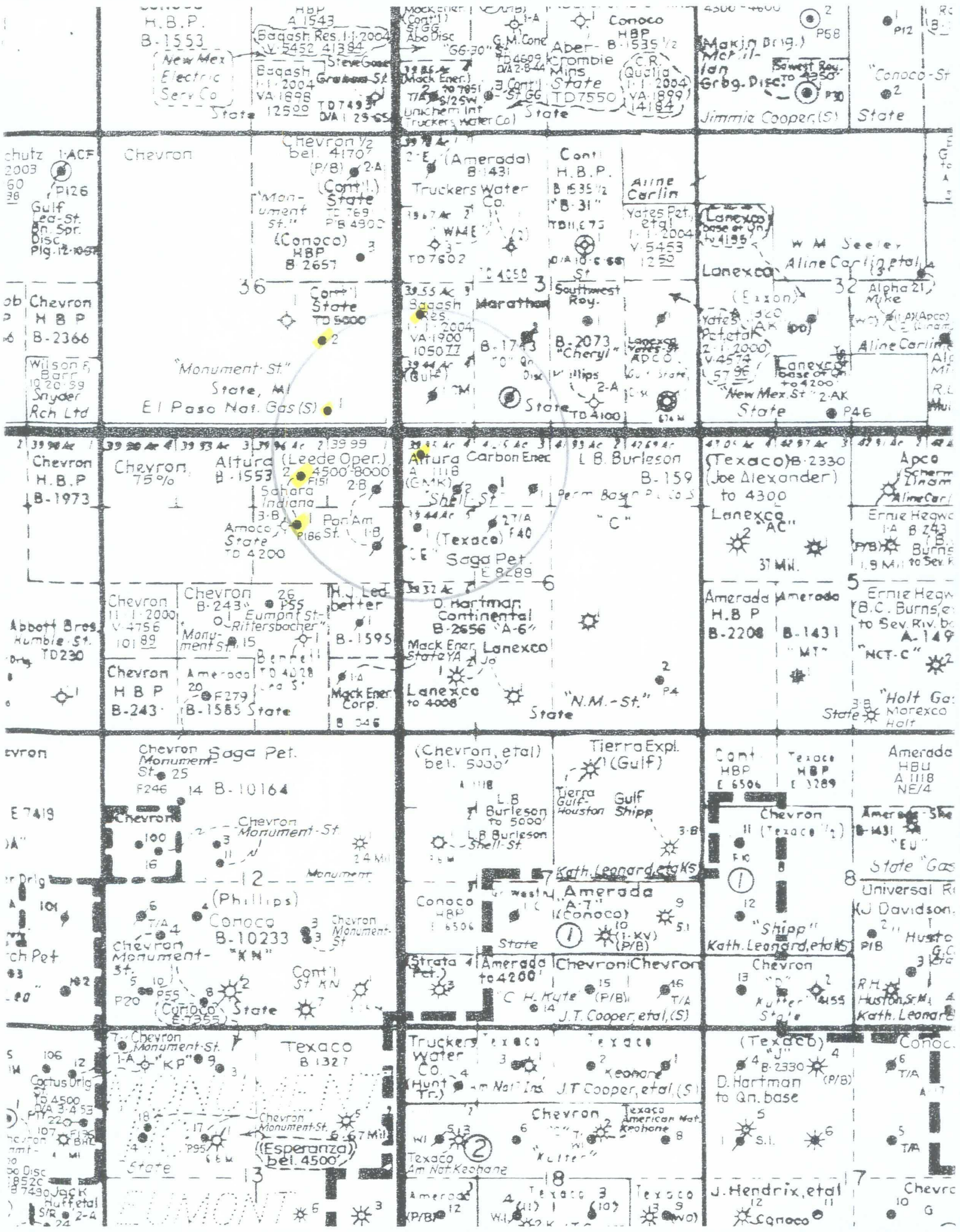
1. Average Daily Rate: 700 BWPD
Maximum Daily Rate: 1400 BWPD
2. Closed System
3. Average Injection Pressure: 600 psig
Maximum Injection Pressure: 1000 psig
4. Source of water will be produced water from various formations in the immediate area which may include Abo, Drinkard, Bone Springs, Delaware, San Andres, Penrose/Queen, and Yates-Seven Rivers.
5. Water sample analysis from two offset producing wells are attached.

VIII. GEOLOGIC DATA

The proposed injection zones include the lower San Andres, Delaware, and Bone Springs formations in the interval 5110'-6040'. The zones consist of limestones, dolomites, and sands. Regionally the area is considered to be on the western edge of the Central Basin Platform transitioning to the Delaware Basin. The Ogallala aquifer overlies the proposed location. Maximum well depth within one mile is

180 feet with average depth to water of 52 feet. Attached is the Water Column Report from the New Mexico State Engineer's Office for a radius of one mile around the proposed location.

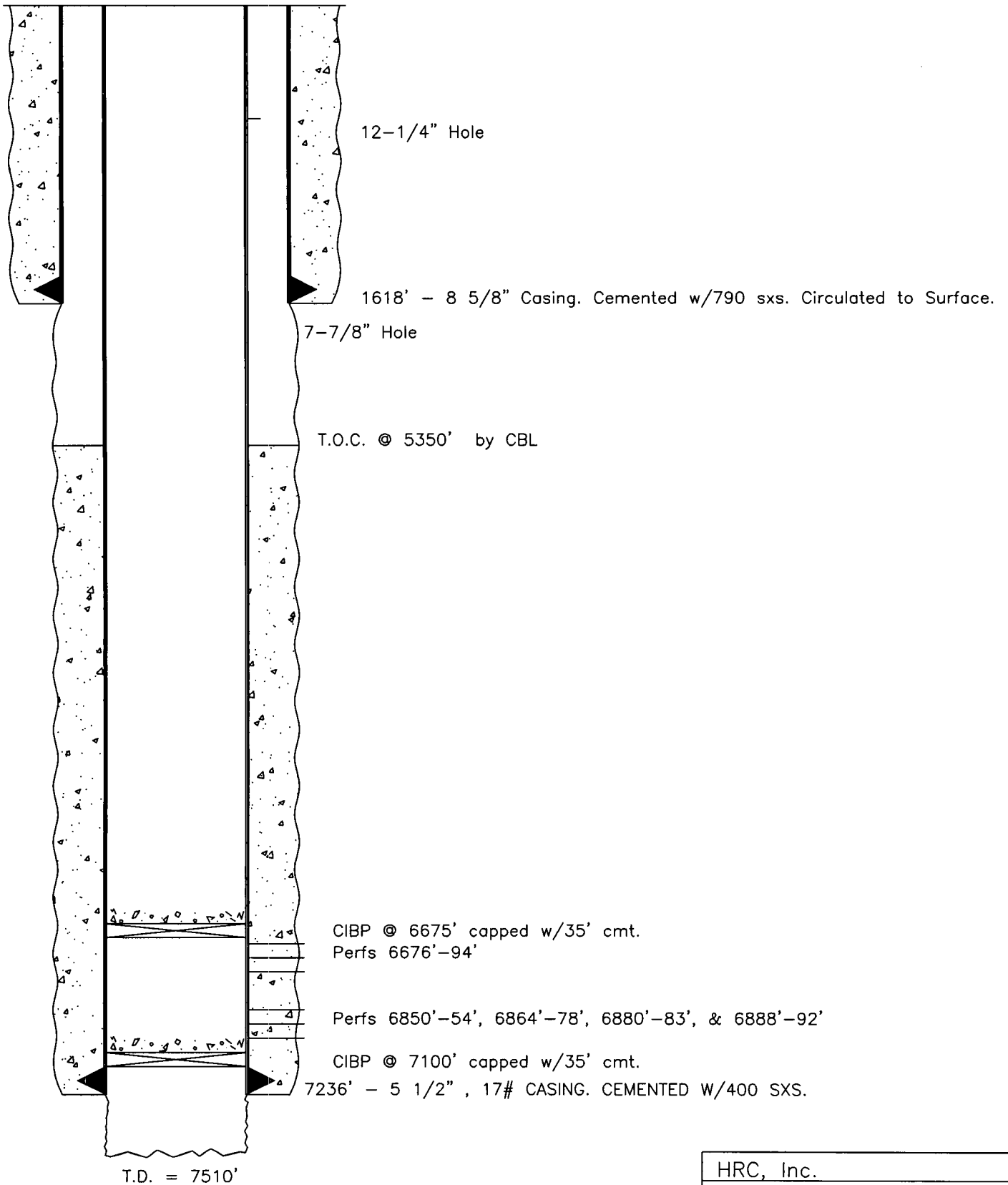
- IX.** Perforated intervals will be acidized as required with up to a total of 10,000 gallons of 15% HCL-NE-FE acid.
- X.** Well logs have been previously submitted.
- XI.** The six wells located in the vicinity of the wellbore are in service with the local electric utility company. No sample taps are installed and we were unable to obtain water samples for analysis.
- XII.** Examination of the available geologic and engineering data reveals no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII.** "Proof of Notice" advertisement and return receipts are attached.



CURRENT WELLBORE

5/26/2009

Elev. = 3735' GL

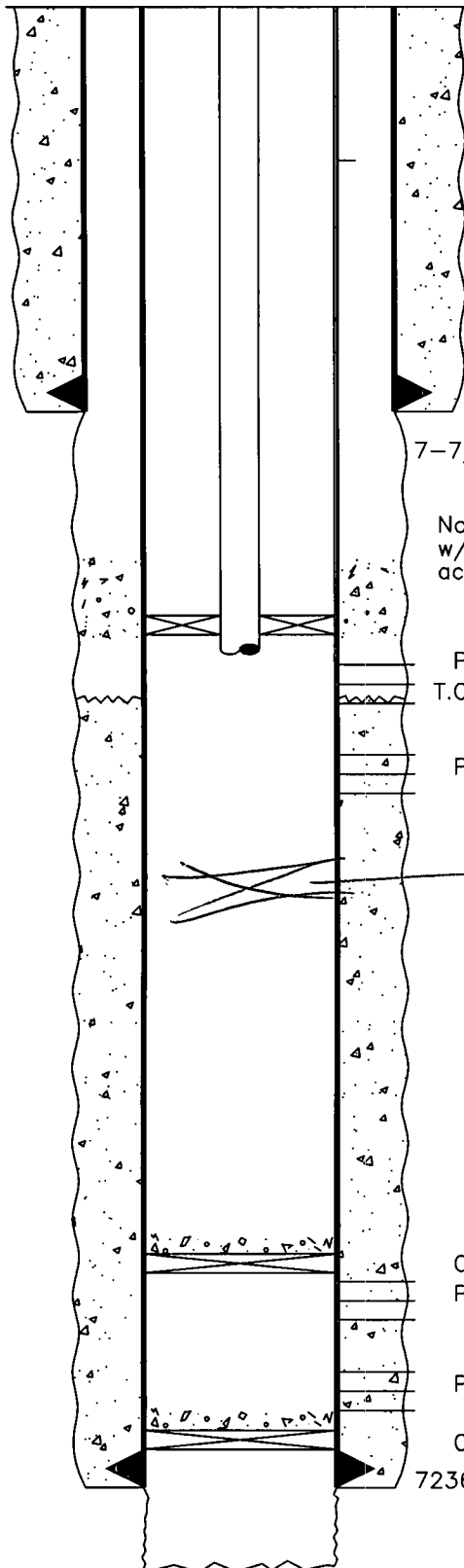


HRC, Inc.
Goodwin State No. 1
330' FNL & 330' FWL
Sec. 6, T-19S, R-37E
Lea County, New Mexico

PROPOSED SWD INJECTOR

5/26/2009

Elev. = 3735' GL



12-1/4" Hole

5000' 2-7/8", 6.5#, J-55, IPC Tubing
w/Baker Modle 'R' nickel plated packer or equivalent

1618' - 8 5/8" Casing. Cemented w/790 sxs. Circulated to Surface.

7-7/8" Hole

Note: Annulus will be squeezed/circulated from perfs @ 5100'
w/200sx. only if perfs at TOC (5110'-5376') are required to obtain
acceptable injection rates.

Perfs 5110'-55', 5199'-5226', 5238'-50', & 5348'-76'
T.O.C. @ 5350' by CBL

Perfs 5658'-70', 5678'-86', 5746'-94', & 6004'-6040'

See PLU

CIBP @ 6675' capped w/35' cmt.
Perfs 6676'-94'

Perfs 6850'-54', 6864'-78', 6880'-83', & 6888'-92'

CIBP @ 7100' capped w/35' cmt.
7236' - 5 1/2", 17# CASING. CEMENTED W/400 SXS.

T.D. = 7510'

HRC, Inc.
Goodwin State No. 1
330' FNL & 330' FWL
Sec. 6, T-19S, R-37E
Lea County, New Mexico

Lease Name :	North Well	Date Sampled : 06/03/08
Well Number :		Capitan Rep. :
Location :	Lea County, N.M.	Company Rep. :

1. pH	7.9	
2. Specific Gravity @ 60/60 F.	1.048	
3. CaCO ₃ Saturation Index @ 80 F.	+1.510	'Calcium Carbonate Scale Possible'
@ 140 F.	+2.440	'Calcium Carbonate Scale Possible'

4. Hydrogen Sulfide	300	PPM
5. Carbon Dioxide	10	PPM
6. Dissolved Oxygen	Not Determined	

16. Soluble Iron (Fe)	8	/	18.2	=	0.44
17. Total Dissolved Solids	61,863				
18. Total Hardness As CaCO3	10,250				
Calcium Sulfate Solubility @ 90 F.	3,241				
20. Resistivity (Measured)	0.140	Ohm/Meters	@	76	Degrees (F)

Figure 1 consists of two vertically stacked log-linear plots. The top plot shows the evolution of anion concentrations (Cl, HCO₃, SO₄, CO₃) on a logarithmic y-axis (1 to 10,000) against an unlabeled x-axis. The bottom plot shows the evolution of cation concentrations (Na, Ca, Mg, Fe) on a logarithmic y-axis (1 to 10,000) against the same unlabeled x-axis. Both plots show a decreasing trend for anions and an increasing trend for cations.

Ion	Top Plot (Anions)	Bottom Plot (Cations)
Cl	10,000	10,000
HCO ₃	100	100
SO ₄	10	10
CO ₃	1	1

COMPOUND	Eq. Wt.	X	MEQ/L	=	mg/L
Ca(HCO ₃) ₂	81.04	X	17.65	=	1,430
CaSO ₄	68.07	X	8.20	=	558
CaCl ₂	55.50	X	103.51	=	5,745
Mg(HCO ₃) ₂	73.17	X	0.00	=	0
MgSO ₄	60.19	X	0.00	=	0
MgCl ₂	47.62	X	74.69	=	3,557
NaHCO ₃	84.00	X	0.00	=	0
NaSO ₄	71.03	X	0.00	=	0
NaCl	58.46	X	864.06	=	50,513

**CAPITAN CHEMICAL
WATER ANALYSIS REPORT**

Lease Name : Well Number : Location :	South Well Lea County, N.M. Date Sampled : 06/03/08 Capitan Rep. : Company Rep. :
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ANALYSIS

1. pH	8	
2. Specific Gravity @ 60/60 F.	1.038	
3. CaCO ₃ Saturation Index @ 80 F.	+1.370	'Calcium Carbonate Scale Possible'
@ 140 F.	+2.300	'Calcium Carbonate Scale Possible'

Dissolved Gasses

4. Hydrogen Sulfide	240	PPM
5. Carbon Dioxide	90	PPM
6. Dissolved Oxygen	Not Determined	

Cations

	mg/L	/	Eq. Wt.	=	MEQ/L
7. Calcium (Ca++)	1,900	/	20.1	=	94.53
8. Magnesium (Mg++)	1,033	/	12.2	=	84.65
9. Sodium (Na+) Calculated	24,542	/	23.0	=	1,067.04
10. Barium (Ba++)	Not Determined	/	68.7	=	0.00

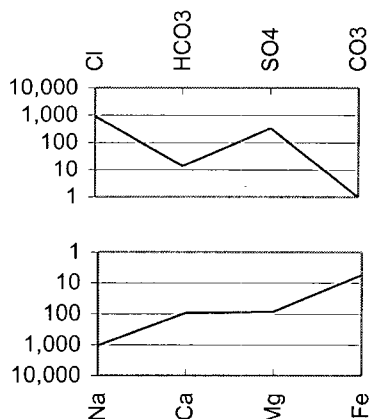
Anions

11. Hydroxyl (OH-)	0	/	17.0	=	0.00
12. Carbonate (CO ₃ =)	0	/	30.0	=	0.00
13. Bicarbonate (HCO ₃ -)	830	/	61.1	=	13.58
14. Sulfate (SO ₄ =)	16,164	/	48.8	=	331.23
15. Chloride (Cl-)	32,000	/	35.5	=	901.41

Other

16. Soluble Iron (Fe)	100	/	18.2	=	5.49
17. Total Dissolved Solids	76,468				
18. Total Hardness As CaCO ₃	9,000				
Calcium Sulfate Solubility @ 90 F.	2,364				'Calcium Sulfate Scale Possible'
20. Resistivity (Measured)	0.200	Ohm/Meters	@ 77	Degrees (F)	

Logarithmic Water Pattern



PROBABLE MINERAL COMPOSITION

COMPOUND	Eq. Wt.	X	MEQ/L	=	mg/L
Ca(HCO ₃) ₂	81.04	X	13.58	=	1,100
CaSO ₄	68.07	X	80.95	=	5,510
CaCl ₂	55.50	X	0.00	=	0
Mg(HCO ₃) ₂	73.17	X	0.00	=	0
MgSO ₄	60.19	X	84.65	=	5,095
MgCl ₂	47.62	X	0.00	=	0
NaHCO ₃	84.00	X	0.00	=	0
NaSO ₄	71.03	X	165.63	=	11,765
NaCl	58.46	X	901.41	=	52,696



New Mexico Office of the State Engineer

Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE)

(quarters are smallest to largest)

(NAD83 UTM in meters)

(In feet)

POD Number	Sub	Use	County	Q Q Q					X	Y	Distance	Depth	Depth	Water	
	basin			64	16	4	Sec	Tws				Rng	Well	Water	Column
L 03792		PRO	LE	4	2	01	19S	36E	659238	3618348*	587	106	47	59	
L 03792 APPRO		PRO	LE	4	2	01	19S	36E	659238	3618348*	587	106	47	59	
L 03079		PRO	LE	1	4	36	18S	36E	658813	3619550*	998	122	65	57	
L 03079 APPRO		PRO	LE	1	4	36	18S	36E	658813	3619550*	998	122	65	57	
L 11573		DOM	LE	2	2	3	31	18S	37E	660123	3619669*	1004	150		
L 03153		PRO	LE				31	18S	37E	660229	3619765*	1144	140	70	70
L 03153 APPRO		PRO	LE				31	18S	37E	660229	3619765*	1144	140	70	70
L 04324		PRO	LE	1	4	01	19S	36E	658843	3617938*	1148	110	40	70	
L 04324 APPRO		PRO	LE	1	4	01	19S	36E	658843	3617938*	1148	110	40	70	
L 03166		PRO	LE	4	1	31	18S	37E	660016	3619973*	1216	108	35	73	
L 03166 APPRO		PRO	LE	4	1	31	18S	37E	660016	3619973*	1216	108	35	73	
L 07843		SAN	LE	3	3	2	36	18S	36E	658705	3619852*	1293	181	55	126
L 02601		PRO	LE	3	3	06	19S	37E	659655	3617548*	1314	115			
L 02695		PRO	LE	3	4	3	06	19S	37E	659946	3617446*	1470	100	50	50
L 02695 APPRO		PRO	LE	3	4	3	06	19S	37E	659946	3617446*	1470	100	50	50
L 05189		PRO	LE	1	1	31	18S	37E	659606	3620371*	1515	120	65	55	

Average Depth to Water: **52 feet**

Minimum Depth: **35 feet**

Maximum Depth: **70 feet**

Record Count: 16

Basin/County Search:

Basin: Lea County

County: Lea

UTMNAD83 Radius Search (in meters):

Easting (X): 659532

Northing (Y): 3618857

Radius: 1700

*UTM location was derived from PLSS - see Help

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

Lynx Petroleum Consultants, Inc.

P.O. Box 1708
3325 Enterprise Drive
Hobbs, New Mexico 88241

505 392-6950

Fax: 505 392-7886

RECEIVED

2009 JUN 24 AM 10:23

MEMO

June 23, 2009

To: Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

From: Larry R. Scott, Consultant for
HRC, Inc.

Re: Authorization to Inject
Goodwin State No. 1
330' FNL & 330' FWL, Section 6, T-19S, R-37E
Lea County, New Mexico

Enclosed please find a copy of the "proof of notice" to the owners of the surface of the land and "proof of publication" of the legal notice, all to be included with the previously submitted Application for Authorization to Inject (Form C-108) in reference to the Goodwin State No. 1.

Thank you.

SLD
POB 1148
Santa Fe, NM
87504-1148

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Julie Truitt* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Julie Truitt

C. Date of Delivery
6-8-09

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Julie Truitt* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Julie Truitt

C. Date of Delivery
JUN 11 2009

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *K. Pratt* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
K. PRATT

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *George McAlpine* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
GEORGE McALPINE

C. Date of Delivery
6/8/2009

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Julie Truitt* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Julie Truitt

C. Date of Delivery
6/8/09

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *George McAlpine* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
GEORGE McALPINE

C. Date of Delivery
6/8/2009

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marathon Oil Co.
5555 San Felipe St.
Houston, TX
77056

Article Number

(Transfer from service label)

7007 2560 0003 0324 0878

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

L. HADDER

C. Date of Delivery

6/18

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

HOBBS NEWS-SUN • WEDNESDAY, JUNE 17, 2009

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Oxy USA
PO Box 4294
Houston, TX 77210-
4294

2. Article Number

(Transfer from service label)

7007 2560 0003 0324 0892

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

JAMES B. BURNETT

C. Date of Delivery

JUN 9 2009

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

LEGAL

LEGAL NOTICE
June 17, 24 & July 1, 2009

NOTICE OF WATER DISPOSAL WELL

HRC, Inc., P.O. Box 5012, Hobbs, NM 88241, 575-393-3194, Contact - Gary Schubert, has made application to the New Mexico Oil Conservation Division to convert the Goodwin State No. 1 well from a producer into a commercial salt-water disposal well. The well is located 330' FNL & 330' FWL of Section 6, T-19S, R-37E, Lea County, New Mexico. Disposal will be into the San Andres, Delaware, Bone Springs formations between 5110 and 6040'. Interested parties must file objections or a request for a hearing with the NMOCD, 1220 South St. Francis Dr, Santa Fe, New Mexico, 87505, within 15 days of this notice.

25030

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

XTO Energy, Inc.
200 N. Loraine,
Suite 800
Midland, TX 79701

2. Article Number

(Transfer from service label)

7007 2560 0003 0324 0854

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

S. GARRETT

C. Date of Delivery

6-5-09

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Lynx Petroleum Consultants, Inc.

P. O. Box 1708

3325 Enterprise Drive

Hobbs, New Mexico 88241

505 392-6950

Fax: 505 392-7886

FACSIMILE TRANSMISSION

Company: OCDFax #: 505-476-3462Attention: Will JonesFrom: Larry R. Scott for HRC, Inc. Date: 07/09/09Number of pages (including this page): 2MESSAGE: The following Affidavit of Publication should beattached to and made a part of Form C-108, Application forAuthorization to Inject previously mailed to you on behalf ofHRC, Inc.

Jones, William V., EMNRD

From: Jones, William V., EMNRD
Sent: Thursday, July 09, 2009 11:34 AM
To: 'Larry Scott'
Cc: tfh@valornet.com; 'Gary Schubert'; Hill, Larry, EMNRD
Subject: RE: Disposal Application on behalf of HRC INC: Goodwin State #1 30-025-34593 Lower SA, Del, Bone Spring Commercial Disposal

Larry
Thanks for the reply.

No problem, I can write the permit so as to allow injection across the entire requested interval (the pressure limit will be set based on the permitted top) and if you determine on the fly that more than the lower perfs are actually needed - put a requirement to squeeze cement and verify the squeeze placement.

I know, HRC would do this anyway and otherwise our district office would require it, but this covers our UIC requirements.

This way also saves me some time re-visiting this application.

Thank You,

William V. Jones PE
New Mexico Oil Conservation Division
1220 South St. Francis
Santa Fe, NM 87505
505-476-3448

From: Larry Scott [mailto:lrscott@leaco.net]
Sent: Thursday, July 09, 2009 11:00 AM
To: Jones, William V., EMNRD
Cc: tfh@valornet.com; 'Gary Schubert'
Subject: RE: Disposal Application on behalf of HRC INC: Goodwin State #1 30-025-34593 Lower SA, Del, Bone Spring Commercial Disposal

Will:

We got the cement top via CBL information from the C-101 submitted to the OCD by Xeric on 12/6/99. I don't know why Eddie missed this. Since the perforated interval requested in his application was above the existing TOC, he may have figured they would have to do some remedial cementing anyway, making the original TOC a moot point.

The lower set of perfs (5658'-6040' gross interval) in our app are >200' below the existing 5350' cement top and, if the upper perfs are required, the 200 sx. squeeze should very conservatively bring the TOC all the way to 4350'. With the upper set of perfs at 5110'—5376' we would still be >200' below the new TOC. We should be within your requirements either way.

I would very much like to have the flexibility to squeeze and shoot the upper set of perfs while we're rigged up and doing the conversion. We would have no problem with an amendment process as long as this could be accomplished timely without having to rig down and then come back at a later date. I think there is about a 70% chance that the upper perfs will be needed to obtain acceptable rates and pressures.

Larry

-----Original Message-----

From: Jones, William V., EMNRD [mailto:William.V.Jones@state.nm.us]
Sent: Wednesday, July 08, 2009 10:53 AM
To: Larry Scott

Cc: Kautz, Paul, EMNRD; Hill, Larry, EMNRD; Ezeanyim, Richard, EMNRD

Subject: RE: Disposal Application on behalf of HRC INC: Goodwin State #1 30-025-34593 Lower SA, Del, Bone Spring Commercial Disposal

Thanks Larry:

The CBL question was because your well diagram shows a top verified by a CBL. However the application for SWD-827 done years ago by Eddie Seay shows only a calculated top (and his application also showed the P&Aed well). If you find the CBL please send it to Hobbs for Paul Kautz to scan in – we have been asking for copies of logged verification of cement tops on SWD or Injection wells.

You have advertised for injection over the bigger interval, but it seems you want to try only the interval below the cement top first to see if it is enough. We can write the order to allow injection within 200 feet below the cement top and you can apply for an amendment if that is needed without re-advertising or re-noticing. This should speed up any needed amendment. And let me know if you can live with the 200 feet from a verified cement top. If you don't find the reported CBL, but want to perforate closer than 200 feet from this recorded cement top, please run another CBL. If you only find a Temp Survey, please run a CBL. Notwithstanding these statements, for well work, please cover everything with the OCD Hobbs office.

Thank You for this,

William V. Jones PE

New Mexico Oil Conservation Division
1220 South St. Francis
Santa Fe, NM 87505
505-476-3448

From: Larry Scott [mailto:lrscott@leaco.net]

Sent: Tuesday, July 07, 2009 9:18 AM

To: Jones, William V., EMNRD

Cc: 'Gary Schubert'; tfh@valornet.com

Subject: RE: Disposal Application on behalf of HRC INC: Goodwin State #1 30-025-34593 Lower SA, Del, Bone Spring Commercial Disposal

Will:

1. No business lease (surface use agreement) was ever obtained from the SLO but we have requested one concurrently with this application. SWD-827 has never been utilized. The well has been TA'd since its acquisition from Xeric. The reason this project is being re-activated is the interest of a local trucking company in disposal capacity in the area.
2. I'm in possession of the "well file" with no logs present. I'll ask Gary if he is still holding anything but am not optimistic. We selected the proposed perforation intervals from drilling time on the mudlog but plan to run a GR-N before perforating. It shouldn't cost much to add a CBL if you guys need one.
3. We are planning to test the lower perforations (below existing cement top) for acceptable rates and pressures prior to squeezing. We will only squeeze if the upper perms are required for suitable capacity. Please see the note on the "as constructed" wellbore diagram. A plug within 200' of the bottom perf shouldn't be a problem.
4. Xeric did not turn up in our land investigation. The base lease appears to belong to Oxy?
5. The P&A well located in L-31-18S-37E is actually an active SWD well in intervals similar to those requested in this application. It is well No. 5 in the "Wells in Area of Review" section but was mistakenly identified in the app as being in 36E rather than 37E.

Thanks for the timely review. Don't hesitate to shout if there are any additional questions.

Larry

-----Original Message-----

From: Jones, William V., EMNRD [mailto:William.V.Jones@state.nm.us]

Sent: Monday, July 06, 2009 4:39 PM

To: Larry Scott

Cc: Ezeanyim, Richard, EMNRD; Kautz, Paul, EMNRD

Subject: Disposal Application on behalf of HRC ING: Goodwin State #1 30-025-34593 Lower SA, Del, Bone Spring Commercial Disposal

Hello Larry:

Just a few questions – the application otherwise appears OK:

- 1) Did Gary Schubert get a surface use agreement from the State Land Office? According to Gary Schubert, this was one of the holdups before to beginning injection. This well was approved for disposal in the upper SA with SWD-827 and the deadline to inject was extended at least once. Apparently the well was never used for injection?
- 2) Please ask HRC to send a copy of the CBL run to determine the cement top and any elog they have over this intended disposal interval. The only log in the Division's web site is a log over the 7000 foot interval and a Mudlog. It is likely that HRC has some sort of elog over this interval.
- 3) Any disposal permit will require a plug to be set within 200 feet below the bottom of the intended disposal interval after or before the existing cement top is raised by squeeze operations.
- 4) Xeric was noticed before but not this time – were they bought out by another company? Thank You for these notices.
- 5) Is there a Plugged well in Unit L of Section 31 that penetrates this interval and is within ½ mile? If so, please send the well bore diagram.

Thanks for this application.

William V. Jones PE
New Mexico Oil Conservation Division
1220 South St. Francis
Santa Fe, NM 87505
505-476-3448

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Injection Permit Checklist (7/8/08)

Case SWD 827-A WFX PMX IPI Permit Date UIC (A.S.O.)

Wells 1 Well Name: Godwin Sta #1

API Num: (30-) 025-34593 Spud Date: 1999 New/Old: N (UIC primacy March 7, 1982)

Footages 330 FNL 330 FUL Unit D Sec 6 Tsp 19S Rge 31E County Lea

Operator: HRC, Inc. Contact: Larry R. Scott
Garry Schubert

OGRID: 131652 RULE 40 Compliance (Wells) 0/4 (Finan Assur) OK

Operator Address: PO - Box 5102, Hobbs, NM, 88244

Current Status of Well: TAED

Planned Work to Well: Commercial SWP. Raise CRT TOP, PB, Ppf Planned Tubing Size/Depth: 27/8 @ 5000'

	Sizes Hole.....Pipe	Setting Depths	Cement Sx or Cf	Cement Top and Determination Method
Existing Surface	<u>12 1/4 8 5/8</u>	<u>1618</u>	<u>790</u>	<u>CIRC</u>
Existing Intermediate				
Existing Long String	<u>7 7/8 5 1/2</u>	<u>7236</u>	<u>400</u>	<u>5350 CBL</u>

OV Foot Liner Open Hole 7236 Total Depth 7310

Well File Reviewed ✓

Diagrams: Before Conversion ✓ After Conversion ✓ Elogs in Imaging File: NO

Intervals:	Depths	Formation	Producing (Yes/No)
Above (Name and Top)			
Above (Name and Top)			
Injection..... Interval TOP:	<u>5110</u>	<u>SA</u>	<u>U6</u>
Injection..... Interval BOTTOM:	<u>6040</u>	<u>DELT B.S.I</u>	<u>NO</u>
Below (Name and Top)	<u>6210</u>	<u>Black</u>	

MVD LOG only of the interval
SWD 827-A
4890-4920 SA
exp 10/11/64
1022 PSI Max. WHIP
NO Open Hole (Y/N)
NO Deviated Hole?

Sensitive Areas: Cepitan Reef Cliff House Salt Depths

.... Potash Area (R-111-P) NO Potash Lessee NO Noticed? NO

Fresh Water: Depths: 0-180' Wells (Y/N) Y Analysis Included (Y/N): N Affirmative Statement ✓

Salt Water: Injection Water Types: ABO/DR/BSDAL/SA/PRQN/YTR Analysis? ✓

Injection Interval.....Water Analysis: ✓ Hydrocarbon Potential NO

Notice: Newspaper (Y/N) ✓ Surface Owner SLO Mineral Owner(s) NO

RULE 701B(2) Affected Parties: Burdon/Suncoy/COMP/Seaham/Mauch/OXT/XTO

Area of Review: Adequate Map (Y/N) ✓ and Well List (Y/N) ✓

Active Wells 5 Num Repairs 0 Producing in Injection Interval in AOR NO but active inj.

..P&A Wells 0 Num Repairs 0 All Wellbore Diagrams Included? NO

Questions to be Answered: Raise CRT TOP Set PLG WITHIN 200' Send P&A DIAG State HI L/BI
Check Reliability of new zones
Send LOG over this interval

Required Work on This Well: Send CBL Request Sent NO Reply: NO

AOR Repairs Needed: NO Request Sent NO Reply: NO

Request Sent NO Reply: NO