

TAMARACK PETROLEUM COMPANY, INC.



1485 ONE FIRST CITY CENTER
MIDLAND, TEXAS 79701

TELEPHONE: 683-5474

July 29, 1986

State of New Mexico
Energy and Minerals Department
Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501
Attention: Mr. R. L. Stamets - Director

RE: Application to Expand Waterflood
in the Bronco Wolfcamp Pool
Lea County, New Mexico

Dear Sir:

Enclosed is our Application to Convert The Bronco Wolfcamp Unit No. 7 Producing Well to Water Injection. Tamarack Petroleum Co., Inc. requests this application be approved administratively. All the required application information is attached to the original and copy, the duplicate is mailed to the district office in Hobbs. Should additional information or other request be necessary, please contact me at the above address.

Very truly yours,

A handwritten signature in cursive script that reads "Randy A. McClay". The signature is written in dark ink and is positioned above the printed name and title.

Randy A. McClay
Engineering Manager

cc: Hobbs District
Attention: Jerry Sexton

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☒ Secondary Recovery ☐ Pressure Maintenance ☐ Disposal ☐ Storage
Application qualifies for administrative approval? ☒ yes ☐ no

II. Operator: Tamarack Petroleum Co., Inc.

Address: 500 W. Texas, Suite 1485; Midland, TX 79702

Contact party: Randy A. McClay Phone: 915-683-5474

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 R-4529 & R4528

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. SEE ATTACHED

VII. Attach data on the proposed operation, including: SEE ATTACHED

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 geological data on the injection zone including appropriate lithologic detail, geological 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 source known to be immediately underlying the injection interval. SEE ATTACHED

IX. Describe the proposed stimulation program, if any. SEE ATTACHED

X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.) SEE ATTACHED

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. SEE ATTACHED

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 source of drinking water. SEE ATTACHED

III. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

IV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Randy A. McClay Title: Engineering Manager

Signature: *Randy A. McClay* Date: July , 1986

If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

Application for Waterflood Hearing NMOCC May 9, 1973

Case No. 4960 Order No. R-4529 & Application for Unitization Hearing NMOCC May 9, 1973 Case No. 4959 Order No. R-4529

DISTRIBUTION: Original and one copy to Santa Fe with one copy to the appropriate Division district office

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 name of the next higher and next lower oil or gas zone on 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, P. O. Box 2088, Santa Fe, New Mexico 87501 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.

Hollis W. Harris
1110 Clyde
Amarillo, TX 79106

INJECTION WELL DATA SHEET

SIDE 1

OPERATOR Tamarack Petroleum Co., Inc.

LEASE Bronco Wolfcamp Unit

WELL NO. 7 2110' FSL & 1813' FWT

SECTION J-2-13S-30E

TOWNSHIP

RANGE

FOOTAGE LOCATION

Schematic

Tabular Data

Surface Casing

Size 13 3/8" Cemented with 260 sks.

TOC Surface feet determined by Circulation

Hole size 17 1/2"

325'
TOC (180' temp)

Intermediate Casing

Size 8 5/8" Cemented with 250 sks.

TOC 4572' feet determined by temperature

Hole size 11"

Long string

Size 5 1/2" Cemented with 370 sks.

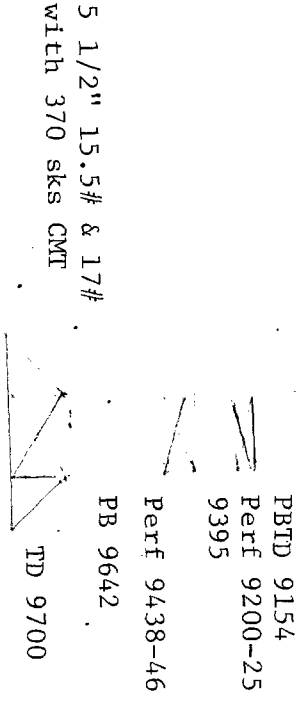
TOC 8100' feet determined by Temperature

Hole size 7 7/8"

Total depth 9700'

Injection Interval

9068' feet to 9100' feet
(perforated or open-hole, indicate which)



Tubing size 2 7/8 & 2 3/8" lined with TK-75 Plastic set in a (material)

Baker Lockset

(brand and model)

9018 packer at feet

(or describe any other casing-tubing seal),

Other Data

1. Name of the injection formation

2. Name of Field or Pool (if applicable)

3. Is this a new well drilled for injection? ☐ Yes ☒ No

If no, for what purpose was the well originally drilled?

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) Perforated 9438-46

squeezed with 32 sks through "DC" squeeze tool at 9397' PB 9395'. Perforated 9200-25 squeezed with 68 sks

through "PC" squeeze tool at 9157 PB 9154'.

5. Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. Devonian 11,800

ATTACHMENT FOR APPLICATION FOR AUTHORIZATION TO INJECT

VI

WELL	TYPE	CONSTRUCTION CSG DEPTH	DATE COMPLETED	LOCATION
Tamarack Petroleum Company, Inc.				
BWCU #4	INJ	5½ @ 11,874	6/24/63 - TOC @ 7304	B-2-13S-38E
BWCU #9	PROD	5½ @ 9183	11/15/80 - TOC @ 7000	A-2-13S-38E
BWCU #6	PROD	5½ @ 9143	8/20/62 - TOC @ 7040	G-2-13S-38E
Tenneco	PROD	5½ @ 9216	2/1/83 - TOC @ 6600	I-2-13S-38E
Harris #1	PROPOSED	INJ. 5½ @ 9700	4/27/62 - TOC @ 8000	J-2-13S-38E
BWCU #7	INJ	5½ @ 9142	7/6/62 - TOC @ 7500	K-2-13S-38E

Texas Oil & Gas

Brownfield#1	PROD	4½ @ 9670	6/5/85	Sec. 358, Blk D, Gibson
Brownfield#2	P&A PROD	4½ @ 9690	8/16/85	Survey, Yoakum Co., TX

VII

1. Anticipated Average Daily Injection - 500
Maximum Daily Injection - 1500
2. Closed System
3. Anticipated Average Pressure - 1100
Maximum Pressure - 1600
4. Produced water from Bronco Devonian and Bronco Wolfcamp

VIII

Geologic Data Previously Submitted

IX

No Stimulation Anticipated

X

Logs Previously Submitted

XI

Sample #1 1/4 mile NE of Unit Well No. 7
Sample #2 400 feet West of Unit Well No. 7

XII

There are no open faults or any other hydrologic connection between the injection zone and any underground source of drinking water based on the available geologic and engineering data

WATER ANALYSIS REPORT
furnished by TRETOLITE CHEMICALS

COMPANY: TAMARACK
LEASE: BWCU
SAMPLE POINT: #1 (NE OF BWCU #7) 1/2 mi. N. of
SAMPLE DATE: 7-3-86

pH: 7.1
H2S: -
SPECIFIC GRAVITY: 1

TITRATED AND CALCULATED IONS

	MILLIGRAMS PER LITER	MILLIEQUIVALENTS PER LITER
HCO3	378.20	6.20
Cl	850.80	23.97
SO4	50.00	1.04
Ca	480.00	24.00
Mg	0.00	0.00
Na	165.78	7.21

IONIC STRENGTH = 0.04
TOTAL HARDNESS = 1200.0 mg/ltr.
TOTAL DISSOLVED SOLIDS = 1924.8 mg/ltr.

PROBABLE MINERAL COMPOSITION AND ION PAIRING

	MILLIEQUIVALENTS PER LITER	MILLIGRAMS PER LITER
Ca (HCO3)2	6.20	502.45
CaSO4	1.04	70.91
CaCl2	16.76	930.09
Mg (HCO3)2	0.00	0.00
MgSO4	0.00	0.00
MgCl2	0.00	0.00
NaHCO3	0.00	0.00
Na2SO4	0.00	0.00
NaCl	7.21	421.37

CALCULATED SCALING TENDENCIES

SCALING INDEX

CaCO3 @ 80 DEG F. = 0.9
CaCO3 @ 120 DEG F. = 1.2

SATURATION POINT

CaSO4 @ 70 DEG F. = 1758.0 MG/LTR.
CaSO4 @ 110 DEG F. = 1812.2 MG/LTR.

(THIS SAMPLE CONTAINED 70.9 MG/LTR. CaSO4)

WATER ANALYSIS REPORT
furnished by TRETOLITE CHEMICALS

COMPANY: TAMARACK
LEASE: BWCU
SAMPLE POINT: #2 (WEST OF BWCU #7)
SAMPLE DATE: 7-3-86

pH: 7.1
H2S: -
SPECIFIC GRAVITY: 1

TITRATED AND CALCULATED IONS

	MILLIGRAMS PER LITER	MILLIEQUIVALENTS PER LITER
HCO ₃	341.60	5.60
Cl	1063.00	29.94
SO ₄	25.00	0.52
Ca	455.00	22.75
Mg	0.00	0.00
Na	306.23	13.31

IONIC STRENGTH = 0.05
TOTAL HARDNESS = 1050.0 mg/ltr.
TOTAL DISSOLVED SOLIDS = 2190.6 mg/ltr.

PROBABLE MINERAL COMPOSITION AND ION PAIRING

	MILLIEQUIVALENTS PER LITER	MILLIGRAMS PER LITER
Ca (HCO ₃) ₂	5.60	453.82
CaSO ₄	0.52	35.45
CaCl ₂	16.63	922.92
Mg (HCO ₃) ₂	0.00	0.00
MgSO ₄	0.00	0.00
MgCl ₂	0.00	0.00
NaHCO ₃	0.00	0.00
Na ₂ SO ₄	0.00	0.00
NaCl	13.31	778.37

CALCULATED SCALING TENDENCIES

SCALING INDEX

CaCO₃ @ 80 DEG F. = 0.8
CaCO₃ @ 120 DEG F. = 1.2

SATURATION POINT

CaSO₄ @ 70 DEG F. = 1775.3 MG/LTR.
CaSO₄ @ 110 DEG F. = 1829.7 MG/LTR.

(THIS SAMPLE CONTAINED 35.5 MG/LTR. CaSO₄)

Bronco Wolfcamp #7

AFFIDAVIT OF PUBLICATION

State of New Mexico,

County of Lea.

1, _____

Robert L. Summers

of the Hobbs Daily News-Sun, a daily newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not in a supplement thereof for a period

of _____

_____ One _____ weeks.

Beginning with the issue dated

_____ July 11 _____, 19 86 _____

and ending with the issue dated

_____ July 11 _____, 19 86 _____

Publisher.

Sworn and subscribed to before

me this 11 day of

July, 19 86
Vera Murphy
Notary Public.

My Commission expires _____

Nov. 14, 19 88
(Seal)

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937, and payment of fees for said publication has been made.

LEGAL NOTICE
JULY 11, 1986

NOTICE OF APPLICATION
FOR FLUID INJECTION

Tamarack Petroleum Company, Inc. 500 West Texas Suite 1485 Midland, TX 79701, (915) 683-5474, Randy A. McClay, Engineering Manager, is making application to the New Mexico Oil Conservation Commission for permission to inject fluid into a formation productive of oil or gas.

The applicant proposes to inject produced water in Bronco Wolfcamp Unit Well No. 7 J-2-135-38E into the Wolfcamp Formation from 9068-9100 feet, for the purpose of secondary recovery.

The maximum injection will be 700 barrels of water at 1600 psig.

Interested parties must file objection or requests for hearing with the Oil Conservation Commission Division, P.O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

PS Form 3811, Apr 1977
RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

SENDER Complete items 1, 2, and 3
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one). 70¢
☒ Show to whom and date delivered. c
☐ Show to whom, date, and address of delivery. c
☐ RESTRICTED DELIVERY
 Show to whom and date delivered. c
☐ RESTRICTED DELIVERY
 Show to whom, date, and address of delivery. \$ c
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO
 TXO Production Co.
 415 W. Wall
 Midland, TX 79701

3. ARTICLE DESCRIPTION
 REGISTERED NO. CERTIFIED NO. INSURED NO.
 189062

(Always obtain signature of addressee or agent)

I have received the article described above.
 SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY POSTMARK
 7-21-86

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO: 1977-0-249-595

PS Form 3811, Apr 1977
RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

SENDER Complete items 1, 2, and 3
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one). 70¢
☒ Show to whom and date delivered. c
☐ Show to whom, date, and address of delivery. c
☐ RESTRICTED DELIVERY
 Show to whom and date delivered. c
☐ RESTRICTED DELIVERY
 Show to whom, date, and address of delivery. \$ c
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
 Hollis W. Harris
 1110 Clyde
 Amarillo TX 79106

3. ARTICLE DESCRIPTION
 REGISTERED NO. CERTIFIED NO. INSURED NO.

(Always obtain signature of addressee or agent)

I have received the article described above.
 SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY POSTMARK
 7-28-86

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO: 1977-0-249-595

PS Form 3811, Apr 1977
RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

SENDER Complete items 1, 2, and 3
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one). 70¢
☒ Show to whom and date delivered. c
☐ Show to whom, date, and address of delivery. c
☐ RESTRICTED DELIVERY
 Show to whom and date delivered. c
☐ RESTRICTED DELIVERY
 Show to whom, date, and address of delivery. \$ c
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO
 Amerada Hess Corp.
 P O Box 840
 Seminole TX 79360

3. ARTICLE DESCRIPTION
 REGISTERED NO. CERTIFIED NO. INSURED NO.

(Always obtain signature of addressee or agent)

I have received the article described above.
 SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY POSTMARK
 7-18-86

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO: 1977-0-249-595

PS Form 3811, Apr 1977
RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

SENDER Complete items 1, 2, and 3
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one). 70¢
☒ Show to whom and date delivered. c
☐ Show to whom, date, and address of delivery. c
☐ RESTRICTED DELIVERY
 Show to whom and date delivered. c
☐ RESTRICTED DELIVERY
 Show to whom, date, and address of delivery. \$ c
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
 ARCO Oil&Gas Co.
 P. O. Box 1610
 Midland, TX 79702

3. ARTICLE DESCRIPTION
 REGISTERED NO. CERTIFIED NO. INSURED NO.

(Always obtain signature of addressee or agent)

I have received the article described above.
 SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY POSTMARK
 7-18-86

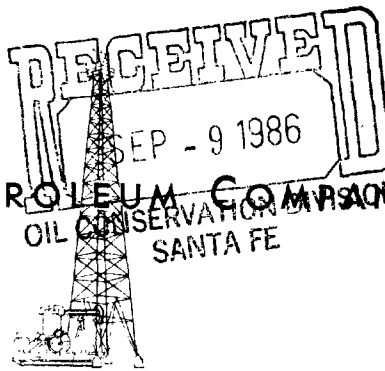
5. ADDRESS (Complete only if requested)
 ARCO OIL & GAS
 P.O. BOX 1610

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO: 1977-0-249-595

TAMARACK PETROLEUM COMPANY, INC.

OIL CONSERVATION DIVISION
SANTA FE



1485 ONE FIRST CITY CENTER
MIDLAND, TEXAS 79701

TELEPHONE: 683-5474

September 5, 1986

State of New Mexico
Energy and Minerals Department
Oil Conservation Division
P. O. Box 2088
Santa Fe, NM 87504

Attention: David Catanach

Re: Tamarack Request to Expand
Bronco Wolfcamp Unit Waterflood
Lea County, New Mexico

Dear Mr. Catanach:

Enclosed are copies of the Texas Railroad Commission's form W-2 for TXO Production Corp.'s Brownfield Wells No. 1 and No. 2. These forms include all the information you requested by phone on September 4, 1986. Also enclosed is form W-3 for the Brownfield No. 2 well which is now plugged and abandoned. A sketch of this information on the plugged well is also enclosed for your records.

Please contact me at the above address with regards to further information on Tamarack's application.

Yours very truly,

Randy A. McClay
Engineering Manager

RAM:jj

Enclosures

Type or print only

RAILROAD COMMISSION OF TEXAS

Oil and Gas Division

Form W-2

Rev. 4/1/83

483-046

API No. 42-501-32806				7. RRC District No. 8A	
Oil Well Potential Test, Completion or Recompletion Report, and Log					
1. FIELD NAME (as per RRC Records or Wildcat) Bronco (Wolfcamp)		2. LEASE NAME Brownfield		9. Well No. 1	
3. OPERATOR'S NAME (Exactly as shown on Form P-5, Organization Report) TXO Production Corp.			RRC Operator No. 875230		10. County of well site Yoakum
4. ADDRESS 900 Wilco Bldg. Midland, TX 79701					11. Purpose of filing Initial Potential <input checked="" type="checkbox"/> Retest <input type="checkbox"/> Reclass <input type="checkbox"/> Well record only (explain in Remarks) <input type="checkbox"/>
5. If Operator has changed within last 60 days, name former operator					
6a. Location (Section, Block, and Survey) Sec. 358, Blk. D, J H Gibson		6b. Distance and direction to nearest town in this county. 14 miles NW from Gibson			
12. If workover or reclass, give former field (with reservoir) & gas ID or oil lease no. FIELD & RESERVOIR		GAS ID or OIL LEASE #	Oil - O Gas - G	WELL NO.	
13. Type of electric or other log run DIL, Neutron Density			14. Completion or recompletion date 6-3-85		

SECTION I: POTENTIAL TEST DATA IMPORTANT: Test should be for 24 hours unless otherwise specified in field rules.

15. Date of test 6-5-85	16. No. of hours tested 24	17. Production method (Flowing, Gas Lift, Jetting, Pumping— Size & Type of pump) Flowing			18. Choke size 26/64
19. Production during Test Period	Oil - BBLS 190	Gas - MCF 160	Water - BBLS 5	Gas - Oil Ratio 842	Flowing Tubing Pressure 250 PSI
20. Calculated 24- Hour Rate	Oil - BBLS 190	Gas - MCF 160	Water - BBLS 5	Oil Gravity—API—60° 40.2	Casing Pressure N/A PSI
21. Was swab used during this test? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		22. Oil produced prior to test (New & Reworked wells) 80			23. Injection Gas—Oil Ratio N/A

REMARKS:

INSTRUCTIONS: File an original and one copy of the completed Form W-2 in the appropriate RRC District Office within 30 days after completing a well and within 10 days after a potential test. If an operator does not properly report the results of a potential test within the 10-day period, the effective date of the allowable assigned to the well will not extend back more than 10 days before the W-2 was received in the District Office. (Statewide Rules 16 and 51) To report a completion or recompletion, fill in both sides of this form. To report a retest, fill in only the front side.

WELL TESTER'S CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I conducted or supervised this test by observation of (a) meter readings or (b) the top and bottom gauges of each tank into which production was run during the test. I further certify that the potential test data shown above is true, correct, and complete, to the best of my knowledge.

Alicia Henderson

Signature: Well Tester

TXO Production Corp.

Name of Company

RRC Representative

OPERATOR'S CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that this report was prepared by me or under my supervision and direction, and that data and facts stated therein are true, correct, and complete, to the best of my knowledge.

Alicia Henderson

Typed or printed name of operator's representative

(915) 682-7992

6

/ 6 / 85

Telephone: Area Code

Number

Date:

mo.

day

year

Engr. Asst.

Title of Person.

Signature

Alicia Henderson

SECTION II		DATA ON WELL COMPLETION AND LOG (Not Required on Retest)					
24. Type of Completion: New Well <input checked="" type="checkbox"/> Deepening <input type="checkbox"/> Plug Back <input type="checkbox"/> Other <input type="checkbox"/>				25. Permit to Drill, Plug Back or Deepen DATE 3-21-85 PERMIT NO. 269009 Rule 37 CASE NO. Exception Water Injection PERMIT NO. Permit Salt Water Disposal PERMIT NO. Permit Other PERMIT NO.			
26. Notice of Intention to Drill this well was filed in Name of TXO Production Corp.							
27. Number of producing wells on this lease in this field (reservoir) including this well 1		28. Total number of acres in this lease 320					
29. Date Plug Back, Deepening, WorkOver or Drilling Operations: Commenced 5-7-85 Completed 5-28-85		30. Distance to nearest well, Same Lease & Reservoir N/A					
31. Location of well, relative to nearest lease boundaries of lease on which this well is located 660 Feet From West Line and 3300 Feet from North Line of the Brownfield Lease							
32. Elevation (DF, RKB, RT, GR, ETC.) 3796GL & 3807KB				33. Was directional survey made other than inclination (Form W-12)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
34. Top of Pay 9548	35. Total Depth 9670	36. P. B. Depth 9635	37. Surface Casing, Determined by: Field <input type="checkbox"/> Rules <input type="checkbox"/>	Recommendation of T.D.W.R. Railroad Commission (Special) <input checked="" type="checkbox"/>		Dt. of Letter 1/31/85	
38. Is well multiple completion? No		39. If multiple completion, list all reservoir names (completions in this well) and Oil Lease or Gas ID No. FIELD & RESERVOIR			40. Intervals Drilled by: Rotary Tools Cable Tools X		
41. Name of Drilling Contractor FWA					42. Is Cementing Affidavit Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
43. CASING RECORD (Report All Strings Set in Well)							
CASING SIZE	WT #/FT.	DEPTH SET	MULTISTAGE TOOL DEPTH	TYPE & AMOUNT CEMENT (sacks)	HOLE SIZE	TOP OF CEMENT	SLURRY VOL. cu. ft.
13 3/8	48#	450		475sx "C"	17 1/2	Surface	627
8 5/8	32#, 23# & 24#	4712		410sx 35/65	11		
				350sx "C"		2350	1270
4 1/2	11.6#	9670		425sx "H"	7 7/8	8220	
44. LINER RECORD							
Size	TOP		Bottom		Sacks Cement	Screen	
45. TUBING RECORD							
Size	Depth Set	Packer Set	46. Producing Interval (this completion) Indicate depth of perforation or open hole				
2 3/8	9414	9414	From 9548	To 9614			
			From	To			
			From	To			
			From	To			
47. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
Depth Interval			Amount and Kind of Material Used				
9548-9614			3 1/8" gun, 24 holes, spt w/250 gal 15% HCl				
48. FORMATION RECORD (LIST DEPTHS OF PRINCIPAL GEOLOGICAL MARKERS AND FORMATION TOPS)							
Formations	Depth		Formations	Depth			
Clearfork	6896		Wolfcamp	9060			
Tubb	7248						
Wichita Albany	7942						

REMARKS

ROAD COMMISSION OF TEXAS

Oil and Gas Division

Type or print only

Form W-2
Rev. 4/1/83
483-046

API No. 42-501-32903				7. RRC District No. 8A	
Oil Well Potential Test, Completion or Recompletion Report, and Log				8. RRC Lease No. 65368	
1. FIELD NAME (as per RRC Records or Wildcat) Bronco (Wolfcamp)		2. LEASE NAME Brownfield		9. Well No. 2	
3. OPERATOR'S NAME (Exactly as shown on Form P-5, Organization Report) TXO Production Corp.			RRC Operator No. 875230		10. County of well site Yoakum
4. ADDRESS 900 Wilco Bldg. Midland, TX 79701				11. Purpose of filing Initial Potential <input checked="" type="checkbox"/> Retest <input type="checkbox"/> Reclass <input type="checkbox"/> Well record only (explain in Remarks) <input type="checkbox"/>	
5. If Operator has changed within last 60 days, name former operator					
6a. Location (Section, Block, and Survey) Sec. 358, Blk D, J.H. Gibson		6b. Distance and direction to nearest town in this county. 14 miles NW from Gibson			
12. If workover or reclass, give former field (with reservoir) & gas ID or oil lease no. FIELD & RESERVOIR		GAS ID or OIL LEASE #	OIL - O Gas - G	WELL NO.	
13. Type of electric or other log run DIL, Neutron Density			14. Completion or recompletion date 8-14-85		

SECTION I: POTENTIAL TEST DATA IMPORTANT: Test should be for 24 hours unless otherwise specified in field rules.

15. Date of test 8-16-85		16. No. of hours tested 24		17. Production method (Flowing, Gas Lift, Jetting, Pumping—Size & Type of pump) Pumping		18. Choke size N/A	
19. Production during Test Period Oil - BBLS 132		Gas — MCF 75		Water - BBLS 23		Gas - Oil Ratio 568	
20. Calculated 24-Hour Rate Oil - BBLS 132		Gas — MCF 75		Water — BBLS 23		Oil Gravity—API—60° 40.2	
21. Was swab used during this test? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		22. Oil produced prior to test (New & Reworked wells) 210				23. Injection Gas—Oil Ratio N/A	
REMARKS:							

INSTRUCTIONS: File an original and one copy of the completed Form W-2 in the appropriate RRC District Office within 30 days after completing a well and within 10 days after a potential test. If an operator does not properly report the results of a potential test within the 10-day period, the effective date of the allowable assigned to the well will not extend back more than 10 days before the W-2 was received in the District Office. (Statewide Rules 16 and 51) To report a completion or recompletion, fill in both sides of this form. To report a retest, fill in only the front side.

WELL TESTER'S CERTIFICATION I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I conducted or supervised this test by observation of (a) meter readings or (b) the top and bottom gauges of each tank into which production was run during the test. I further certify that the potential test data shown above is true, correct, and complete, to the best of my knowledge.		
 Signature: Well Tester	TXO Production Corp. Name of Company	 RRC Representative

OPERATOR'S CERTIFICATION I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that this report was prepared by me or under my supervision and direction, and that data and facts stated therein are true, correct, and complete, to the best of my knowledge.			
Alicia Henderson Typed or printed name of operator's representative			
Telephone: Area Code	Number	Date: mo. day year	Title of Person Engr. Asst. Signature
	(915) 682-7992	8 / 20 / 85	

31. Was Well filled with Mud-Laden Fluid, according to the regulations of the Railroad Commission <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		32. How was Mud Applied? <div style="text-align: center; font-size: 1.2em;">Circulated</div>		33. Mud Weight <div style="text-align: center; font-size: 1.2em;">14.8 LBS/GAL</div>	
34. Total Depth <div style="text-align: center; font-size: 1.2em;">9690</div>	Other Fresh Water Zones by T.D.W.R. TOP _____ BOTTOM _____ _____ _____ _____	35. Have all Abandoned Wells on this Lease been Plugged according to RRC Rules? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 36. If NO, Explain _____ _____ _____			
Depth of Deepest Fresh Water <div style="text-align: center; font-size: 1.2em;">310</div>					
37. Name and Address of Cementing or Service company who mixed and pumped cement plugs in this well <div style="text-align: center; font-size: 1.2em;">The Western Co.</div>				Date RRC District Office notified of plugging <div style="text-align: center; font-size: 1.2em;">6-10-86</div>	
38. Names and Addresses of Surface Owner of Well Site and Operators of Offset Producing Leases <div style="font-size: 1.2em;">See attached sheets.</div> _____ _____ _____ _____					
39. Was Notice Given Before Plugging to Each of the Above? <div style="font-size: 1.2em;">Yes</div>					
FILL IN BELOW FOR DRY HOLES ONLY 40. For Dry Holes, this Form must be accompanied by either a Driller's, Electric, Radioactivity or Acoustical/Sonic Log or such Log must be released to a Commercial Log Service. <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Log Attached <input type="checkbox"/> Log released to _____ Date _____ </div> <div style="margin-top: 10px;"> Type Logs: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Driller's <input type="checkbox"/> Electric <input type="checkbox"/> Radioactivity <input type="checkbox"/> Acoustical/Sonic </div> </div>					
41. Date FORM P-8 (Special Clearance) Filed? _____					
42. Amount of Oil produced prior to Plugging _____ bbls* <small>* File FORM P-1 (Oil Production Report) for month this oil was produced</small>					
<div style="border: 1px solid black; padding: 5px;"> RRC USE ONLY Nearest Field _____ </div>					

REMARKS _____

9 5 86

RAM

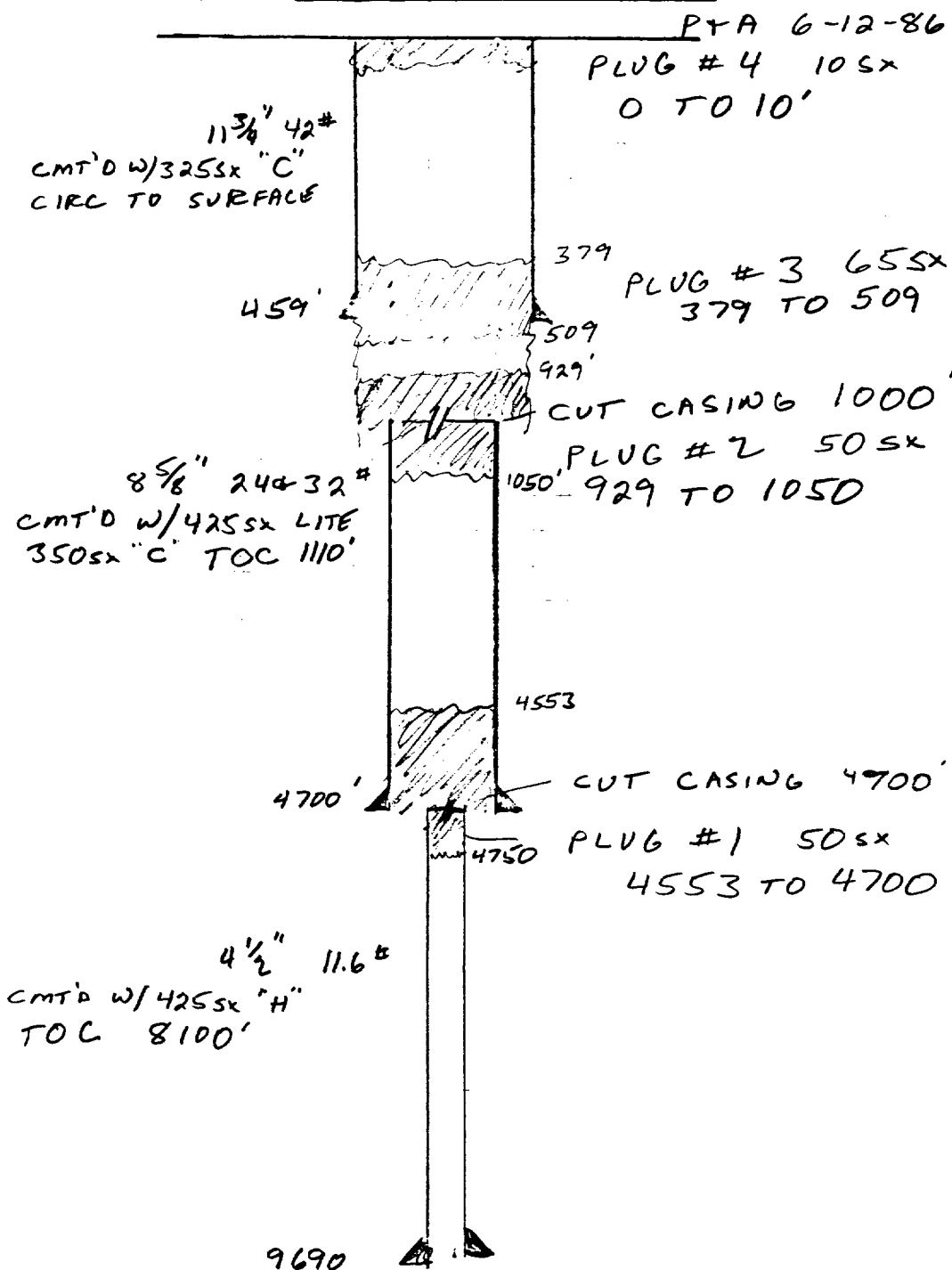
TXO PRODUCTION CORP.

TEXAS

FIELD : BRONCO WOLF CAMP
 LEASE : BROWNFIELD
 UNIT NO.: WELL NO 2

KB : 3801 KB
 PDR: 379DGL

WELL NO





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

TOMMY ANAYA
GOVERNOR

August 1, 1986

POST OFFICE BOX 1980
HOBBS, NEW MEXICO 88240
(505) 393-6161

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

RE: Proposed:

MC _____
DHC _____
NSL _____
NSP _____
SWD _____
WFX XX _____
PMX _____

Gentlemen:

I have examined the application for the:

Tamarack Petroleum Co. Inc.	Bronco Wolfcamp Unit #7-J	2-13-38
Operator	Lease & Well No. Unit	S-T-R

and my recommendations are as follows:

OK -- Jerry Sexton

Yours very truly,

Jerry Sexton
Supervisor, District 1

/mc

LARGE FORMAT
EXHIBIT HAS
BEEN REMOVED
AND IS LOCATED
IN THE NEXT FILE