

ARCO Oil and Gas Company
Central District
Post Office Box 1610
Midland, Texas 79702
Telephone 915 688 5200

NEW MEXICO OIL CONSERVATION DIVISION
RECEIVED



OCT 23 AM 9 36

October 19, 1989

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

RE: Expansion of Seven Rivers Queen Unit Waterflood Project
Administrative Approval Request
Eunice, S. and Langlie Mattix Pools
Lea County, New Mexico

Dear Mr. LeMay,

ARCO Oil and Gas Company respectfully requests administrative approval to expand the Seven Rivers Queen Unit Waterflood Project by converting wells #32, 38, 44, and 52 from oil production to water injection. All of these wells are considered to be "stripper" wells; well #32 produces approximately 5 BOPD and 27 MCFGPD, and #38 produces approximately 4 BOPD and 7 MCFGPD. Wells #44 and #52 are currently shut in due to uneconomical production rates.

Water injection in the #32, 38, 44, and 52 will provide waterflood support to six existing and four proposed Seven Rivers Queen Unit producers. This will enable a more complete recovery of waterflood reserves on the Seven Rivers Queen Unit by increasing the areal sweep of the waterflood.

A copy of this application has been furnished by certified mail to the surface owners and the offset operators within one-half mile of the wells which are proposed to be converted to water injection. Copies of the return receipts are attached. In addition, a notice has been published in the Hobbs Daily News Sun newspaper. The affidavit of publication is attached.

Yours Very Truly,

Cindy W. Ellis
Senior Engineer

CWE
Enclosures

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

Surface Owners (List Attached)

Offset Operators (List Attached)

~~OFFSET OPERATORS~~

Dear Sirs:

Very Truly Yours,

New Mexico Oil Conservation Division
P.O. Box 1980
Hobbs, NM 88240

ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
OFFSET OPERATORS

Meridian Oil, Inc.
21 Desta Drive
Midland, TX 79705

John Hendrix Corporation
223 W. Wall
Midland, TX 79701

Rasmussen Operating, Inc.
6 Desta Drive, Suite 5850
Midland, TX 79705

Chevron USA, Inc.
P.O. Box 670
Hobbs, NM 88240

Texaco, Inc.
P.O. Box 3109
Midland, TX 79702

Conoco Oil Company
P.O. Box 460
Hobbs, NM 88240

Marathon Oil Company
P.O. Box 552
Midland, TX 79702

ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
SURFACE OWNERS

Opal M. Jones Wells #32 & #38
Styles Route
Big Lake, TX 76932

John Dinwiddie (Lessee) Wells #44 & #52
P.O. Box 302
Jal, NM 88252

* Note: Surface owner is the State of New Mexico.

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: Chevron USA, Inc. P. O. Box 670 Hobbs, NM 88240	4. Article Number P 477 984 507
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address X <i>Cherise Allen</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery	

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: Conoco Oil Company P. O. Box 460 Hobbs, NM 88240	4. Article Number P 477 984 509
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address X <i>Jolene D. Ray</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery <i>10-13-89</i>	

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: John Dinwiddie (Lessee) P. O. Box 302 Jal, NM 88252	4. Article Number P 046 661 749
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address <i>John Dinwiddie</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X <i>By Mrs. W. D. Dinwiddie</i>	
7. Date of Delivery <i>10-13-89</i>	

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: John Hendrix Corporation 223 W. Wall Midland, Texas 79701	4. Article Number P 477 984 506
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Cathy Price</i>	
7. Date of Delivery <i>10/13/89</i>	

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: Opal M. Jones Styles Route Big Lake, Texas 76932	4. Article Number P 046 661 748
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X <i>Opal M. Jones</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>W. Hester</i>	
7. Date of Delivery <i>10-13-89</i>	

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: Marathon Oil Company P. O. Box 552 Midland, Texas 79702	4. Article Number P 046 661 747
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Sammy Edwards</i>	
7. Date of Delivery <i>10-13-89</i>	

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: Meridian Oil, Inc. 21 Desta Drive Midland, Texas 79705	4. Article Number P 477 984 505 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery 10/13	

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: Rasmussen Operating, Inc. 6 Desta Drive, Suite 5850 Midland, Texas 79705	4. Article Number P 046 661 750 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Nona Hopkins</i>	
7. Date of Delivery 10-16-88	

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: Texaco Inc. P. O. Box 3109 Midland, Texas 79702	4. Article Number P 477 984 508 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery 10-13-89	

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

AFFIDAVIT OF PUBLICATION

State of New Mexico,
County of Lea.

I, George W. Moore

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 a supplement thereof for a period

of _____

One weeks.
Beginning with the issue dated

October 8, 1989
and ending with the issue dated

October 8, 1989

George W. Moore
Publisher.

Sworn and subscribed to before

me this 17 day of

October, 1989
Danella A. Cole
Notary Public.

My Commission expires _____

July 12, 1993

(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
October 8, 1989

Notice is hereby given that ARCO Oil and Gas Company has filed an application to inject water with the New Mexico Oil Conservation Division. The application is for expansion of the Seven Rivers Queen Unit Waterflood Project, and will involve the conversion of wells #32, 38, 44, and 52 to water injection. The purpose of injection is to develop waterflood reserves. Injection will be in the Lower Seven Rivers and Queen formations within the Eunice, S. and Langlie Mattix Oil Pools at an approximate depth of 3652 ft to 3810 ft. The approximate injection rate and maximum pressure are estimated to be 400 BWPD at 730 psig. The well locations are as follows:
#32: 2310' FEL, & 2310' FEL, Sec 34 T22S, R36E;
#38: 660' FSL & 990' FEL, Sec 34, T22S, R36E; #44: 660' FNL & 660' FWL, Sec 2 T23S, R36E; #52: 1980' FNL & 660' FEL, Sec 3, T23S, R36E, ALL IN LEA COUNTY, NEW MEXICO. Refer questions to Cindy Ellis, ARCO Oil and Gas Company, P.O. Box 1610, Midland, TX 79702, PHONE (915) 688-5546 or Jack Lowder 688-5557. Any objections to this application must be presented to the New Mexico Oil Conservation Division, P.O. Box 2088, Santa Fe, New Mexico, 87501, within 15 days of this notice.

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☒ Secondary Recovery ☐ Pressure Maintenance ☐ Disposal ☐ Storage
Application qualifies for administrative approval? ☒ yes ☐ no
- II. Operator: ARCO Oil & Gas Company
Address: P.O. Box 1610, Midland, TX 79702
Contact party: Cindy Ellis, Sr. Engineer Phone: (915) 688-5546
- 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-4589.
- 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. Previously submitted. Data on new wells is attached.
- 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 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. Previously submitted. No change.
- IX. Describe the proposed stimulation program, if any. 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.) 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. Previously submitted-No changes.
- 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.
- 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: Cindy Ellis Title Senior Engineer
Signature: Cindy Ellis Date: 10-13-89
- * 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. Initial application to inject in 1973. Case # 5016.

Subsequent applications for SRQU # 64: April 1984 & SRQU #65: November 1984.

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 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, 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.

NEW MEXICO
OIL CONSERVATION COMMISSION

Form C-128

Well Location and/or Gas Proration Plat

Date 1-29-57

Operator Dalport Oil Corp.

Lease Otis L. Jones "B"

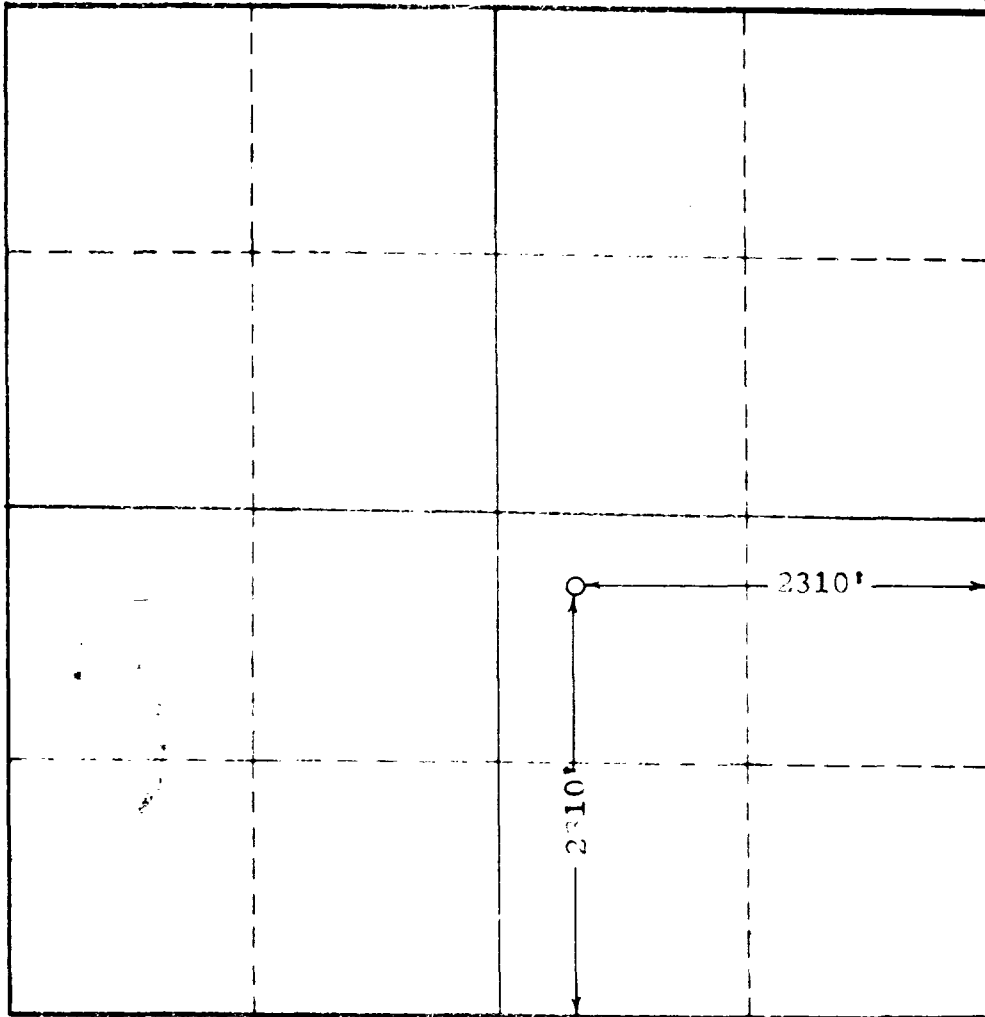
Well No. 1 Section 34 Township 22 S Range 36 E NMPM

Located 2310 Feet From South Line, 2310 Feet From East Line,

Lea County, New Mexico. G. L. Elevation 3497.1

Name of Producing Formation _____ Pool _____ Dedicated Acreage _____

(Note: All distances must be from outer boundaries of Section)



SCALE: 1"=1000'

*new well
name:
Seven Rivers
Queen Unit #32
Cindy Willis
10-5-89*

1. Is this Well a Dual Comp.? Yes _____ No _____

2. If the answer to Question 1 is yes, are there any other dually completed wells within the dedicated acreage? Yes _____ No _____

This is to certify that the above plat was prepared from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Name _____
Position _____
Representing _____
Address _____

Date Surveyed 1-28-57
John W. West
Registered Professional Engineer and/or
Land Surveyor

NEW MEXICO OIL CONSERVATION COMMISSION
Well Location and Acreage Dedication Plat

Section A.

Date 7-12-57

Operator Dalport Oil Corp. Lease Otis L. Jones "C"
Well No. 2 Unit Letter P Section 34 Township 22 South Range 36 East NMPM
Located 660 Feet From South Line, 990 Feet From East Line
County Lea G. L. Elevation 3494.2 Dedicated Acreage _____ Acres
Name of Producing Formation Queen Pool South Eunice

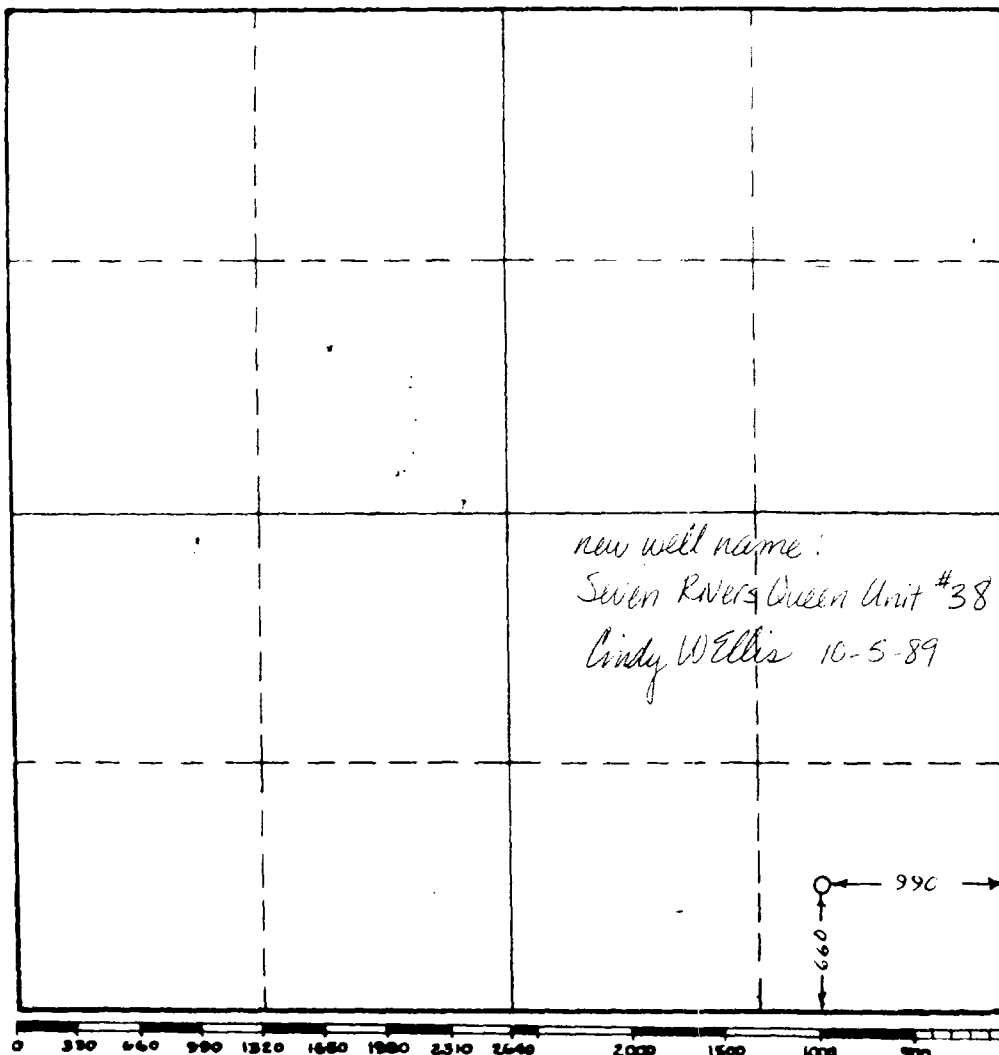
1. Is the Operator the only owner* in the dedicated acreage outlined on the plat below?
Yes _____ No X.
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes X No _____. If answer is "yes," Type of Consolidation Operating Contract
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner

Land Description

Dalport Oil Corp.
Cities

Section B



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

(Operator)

(Representative)

Address

This is to certify that the well location shown on the plat in Section B 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 7-12-57

John W. West
Registered Professional
Engineer and/or Land Surveyor.

Certificate No. 676

(See instructions for completing this form on the reverse side)

NEW MEXICO OIL CONSERVATION COMMISSION
Well Location and Acreage Dedication Plat

MOBBS OFFICE OCC

Section A.

10-4-28-58

PM 3:53

Operator Gulf Oil Corp. Lease J. F. Janda NCT-I
Well No. 3 Unit letter D Section 2 Township 23 S Range 36 E NMFM
Location 660 Feet From North Line, 660 Feet From West Line
County Lea State N.M. Elevation 40 Acres
Name of Producing Formation Queen Pool South Pecos King Lee Dettus

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below?
Yes X No
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes no. If answer is "yes," Type of Consolidation
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner

Land Description

Section B

new well name:
Seven Rivers Queen Unit #44
Cindy Wellis 10-4-89

660'

660'

ILLEGIBLE

This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

Gulf Oil Corporation

(Operator)
ORIGINAL SIGNED
BY

R. F. TAYLOR

(Representative)

Asst. Area Production Superintendent
Box 2167 - Hobbs, New Mexico

Address

This is to certify that the well location shown on the plat in Section B 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 4-26-58

John W. West
Registered Professional
Engineer and/or Land Surveyor.

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600

Certificate No. 676

(See instructions for completion of plat on the reverse side)

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-128
Revised 5/1/57

WELL LOCATION AND ACREAGE DEDICATION PLAT

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

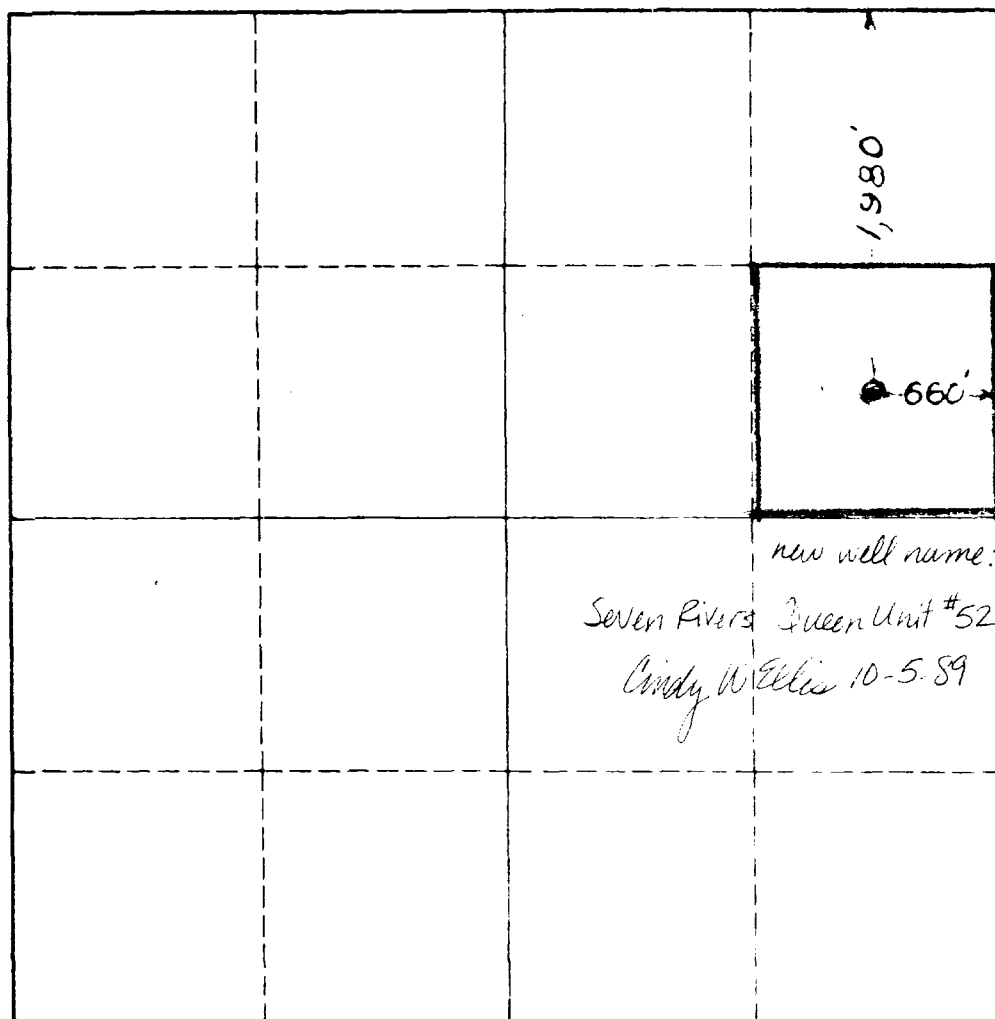
SECTION A

Operator Albert Gackle, Operator		Lease Sinclair State "B"		Well No. 14 2 123	
Unit Letter H	Section 3	Township 23 South	Range 36 East	County Lea	
Actual Footage Location of Well: 1,980' feet from the North line and 660' feet from the East line					
Ground Level Elev. 3,476'	Producing Formation Queen & L. Seven Rivers		Pool Langlie - Mattix	Dedicated Acreage 40 Acres	

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES X NO ____ "Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES ____ NO ____ If answer is "yes," Type of Consolidation ____
3. If the answer to question two is "no," list all the owners and their respective interests below.

Owner	Land Description

SECTION B



CERTIFICATION

I hereby certify that the information in SECTION A above is true and complete to the best of my knowledge and belief.

Name R. F. Montgomery
Position Agent
Company A. Gackle, Operator
Date March 10, 1960

I hereby certify that the well location shown on the plat in SECTION B 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 March 8, 1960

Registered Professional Engineer and Land Surveyor

Certificate No. 3069

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

**ARCO OIL AND GAS COMPANY
SEVEN RIVERS QUEEN UNIT #32
APPLICATION TO INJECT WATER
October, 1989**

III. WELL DATA

- A.1) Location:
2310'FSL & 2310'FEL, Section 34, T22S, R36E
Lea County, New Mexico
- 2) Casing:
8-5/8" @306' w/200 sx cement in 11" hole.
TOC @ surface: circulated.
5-1/2" @3756' w/300 sx cement in 7-7/8" hole.
TOC @2250': calculated top.
- 3) Proposed Tubing:
2-3/8" internally plastic coated @ approximately 3400'.
- 4) Proposed Packer:
Lok-set type (Baker Tool Co.) with on-off tool @ approximately 3400'.
- B.1) Injection formations: Lower Seven Rivers and Queen
Pool Name: Eunice, So. (Seven Rivers/Queen)
- 2) Injection interval: Perfs 3680-3730', Open Hole 3756-3785'.
- 3) Well was drilled 2/57 as a Eunice, So. oil producer.
- 4) Perfs from 3521'-3652' were squeezed in 3/74 w/100 sx cement.
- 5) Next higher productive pool: Jalmat. Base of the Jalmat occurs at 3581'.

VII. PROPOSED OPERATION

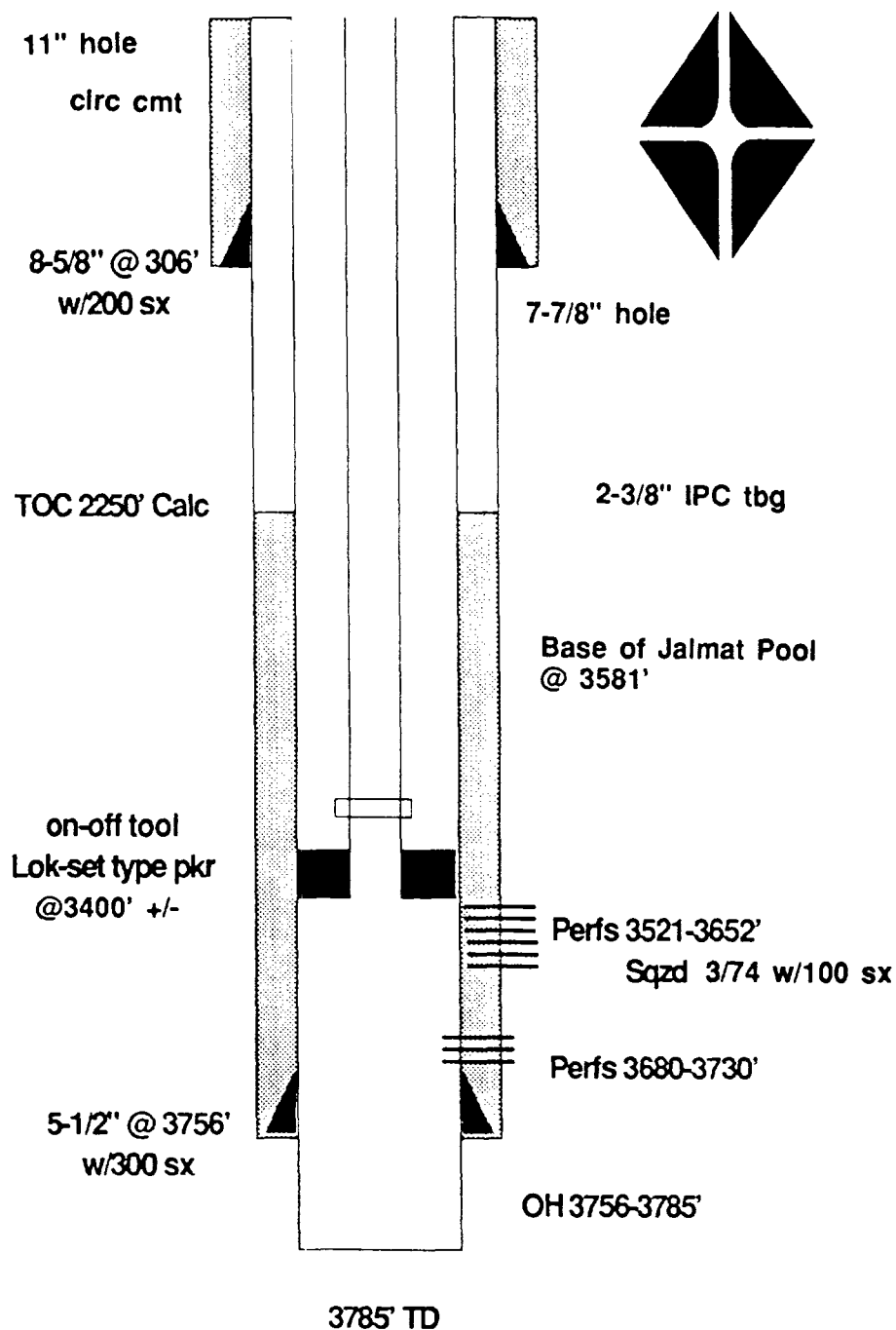
- 1) Average daily rate of fluid to be injected: 400 BWPD.
- 2) The system is closed.
- 3) Average injection pressure: 736 psi.
Maximum injection pressure: 736 psi (0.2 psi/ft).
- 4) Source of injection fluid: Texaco Jal Water System. Analysis attached.

IX. PROPOSED STIMULATION

Acidize perfs 3680-3730 & open hole 3756-3785' w/5000 gals 15% NEFE HCl w/5% micellar solvent @ 2-3 bpm @ 2000 psi in 2 stages using graded rock salt as a diverting agent between stages.

Seven Rivers Queen Unit #32

Proposed Status



ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
WELL #32: EUNICE, SO.(SR/QN) POOL
LOC: 2310'FSL & 2310'FEL SEC 34, T22S, R36E, LEA CO.
COMPLETED 2/57 AS AN OIL PRODUCER.

**ARCO OIL AND GAS COMPANY
SEVEN RIVERS QUEEN UNIT #38
APPLICATION TO INJECT WATER
October, 1989**

III. WELL DATA

- A.1) Location:
660'FSL & 990'FEL, Section 34, T22S, R36E
Lea County, New Mexico
- 2) Casing:
8-5/8" @310' w/200 sx cement in 11" hole.
TOC @ surface: circulated.
5-1/2" @3715' w/350 sx cement in 7-7/8" hole.
TOC @1965': calculated top.
- 3) Proposed Tubing:
2-3/8" internally plastic coated @ approximately 3400'.
- 4) Proposed Packer:
Lok-set type (Baker Tool Co.) with on-off tool @ approximately 3400'.
- B.1) Injection formations: Lower Seven Rivers and Queen
Pool Name: Eunice, So. (Seven Rivers/Queen)
- 2) Injection interval: Perfs 3660-3712', Open Hole 3715-3810'.
- 3) Well was drilled 8/57 as a Eunice, So. oil producer.
- 4) Perfs from 3517'-3578' were squeezed in 3/74 w/150 sx cement. Perfs from 3606'-3650' to be squeezed upon conversion to injection w/approximately 100 sx.
- 5) Next higher productive pool: Jalmat. Base of the Jalmat occurs at 3542'.

VII. PROPOSED OPERATION

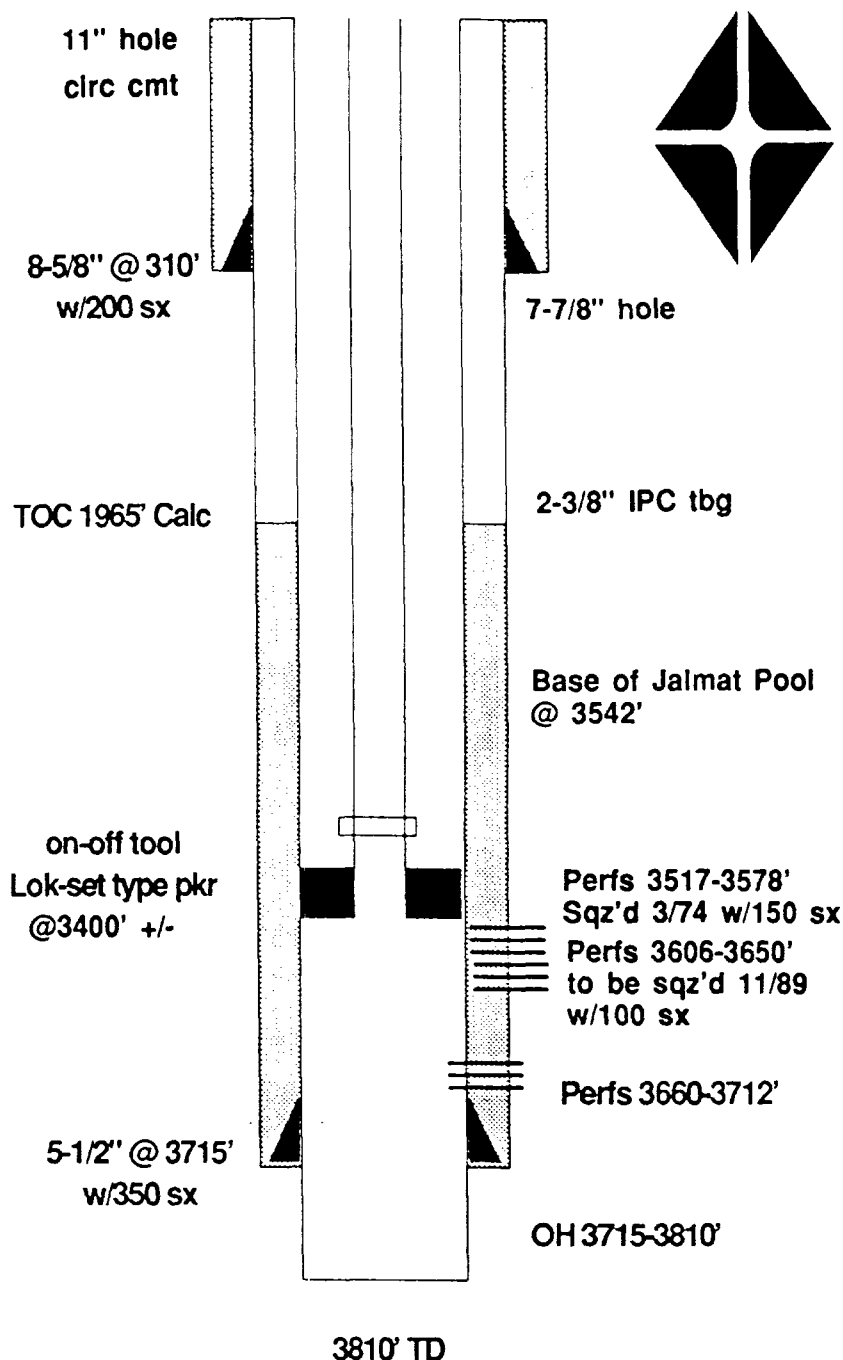
- 1) Average daily rate of fluid to be injected: 400 BWPD.
- 2) The system is closed.
- 3) Average injection pressure: 732 psi.
Maximum injection pressure: 732 psi (0.2 psi/ft).
- 4) Source of injection fluid: Texaco Jal Water System.

IX. PROPOSED STIMULATION

Acidize perfs 3660-3712 & open hole 3715-3810' w/6000 gals 15% NEFE HCl w/5% micellar solvent @ 2-3 bpm @ 2000 psi in 3 stages using graded rock salt as a diverting agent between stages.

Seven Rivers Queen Unit #38

Proposed Status



ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
WELL #38: EUNICE, SO.(SR/QN) POOL
LOC: 660'FSL & 990'FEL, SEC 34, T22S, R36E, LEA CO.
COMPLETED 8/57 AS AN OIL PRODUCER.

**ARCO OIL AND GAS COMPANY
SEVEN RIVERS QUEEN UNIT #44
APPLICATION TO INJECT WATER
October, 1989**

III. WELL DATA

- A.1) Location:
660'FNL & 660'FWL, Section 2, T23S, R36E
Lea County, New Mexico
- 2) Casing:
8-5/8" @394' w/300 sx cement in 12-1/4" hole.
TOC @ surface: circulated.
5-1/2" @3799' w/1100 sx cement in 7-7/8" hole.
TOC @ surface: circulated.
- 3) Proposed Tubing:
2-3/8" internally plastic coated @ approximately 3400'.
- 4) Proposed Packer:
Lok-set type (Baker Tool Co.) with on-off tool @ approximately 3400'.
- B.1) Injection formations: Lower Seven Rivers and Queen
Pool Name: Langlie Mattix (Seven Rivers/Queen)
- 2) Injection interval: Perfs 3652-3757'.
- 3) Well was drilled 5/58 as a Langlie Mattix oil producer.
- 4) There are no abandoned perforations.
- 5) Next higher productive pool: Jalmat. Base of the Jalmat occurs at 3496'.

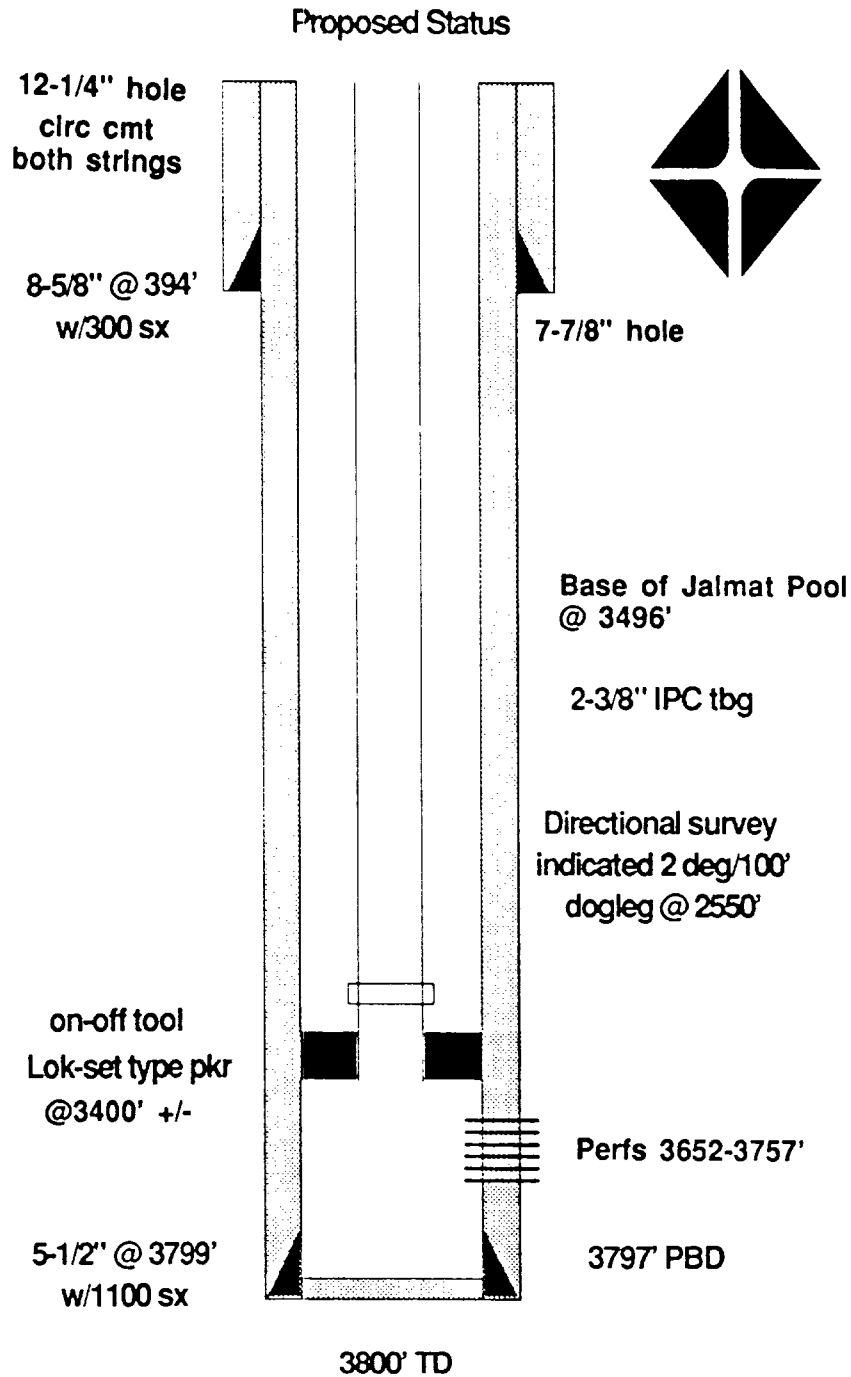
VII. PROPOSED OPERATION

- 1) Average daily rate of fluid to be injected: 400 BWPD.
- 2) The system is closed.
- 3) Average injection pressure: 730 psi.
Maximum injection pressure: 730 psi (0.2 psi/ft).
- 4) Source of injection fluid: Texaco Jal Water System. Analysis attached.

IX. PROPOSED STIMULATION

Acidize perfs 3652-3757 w/5000 gals 15% NEFE HCl w/5% micellar solvent @ 2-3 bpm @ 3000 psi in 2 stages using graded rock salt as a diverting agent between stages.

Seven Rivers Queen Unit #44



ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
WELL #44: LANGLIE MATTIX (SR/QN) POOL
LOC: 660'FNL & 660'FWL, SEC 2, T23S, R36E, LEA CO.
COMPLETED 5/58 AS AN OIL PRODUCER.

**ARCO OIL AND GAS COMPANY
SEVEN RIVERS QUEEN UNIT #52
APPLICATION TO INJECT WATER
October, 1989**

III. WELL DATA

- A.1) Location:
1980'FNL & 660'FEL, Section 3, T23S, R36E
Lea County, New Mexico
- 2) Casing:
8-5/8" @270' w/200 sx cement in 11" hole.
TOC @ surface: circulated.
4-1/2" @3866' w/1535 sx cement in 7-7/8" hole.
TOC @ surface: circulated.
- 3) Proposed Tubing:
2-3/8" internally plastic coated @ approximately 3500'.
- 4) Proposed Packer:
Lok-set type (Baker Tool Co.) with on-off tool @ approximately 3500'.
- B.1) Injection formations: Lower Seven Rivers and Queen
Pool Name: Langlie Mattix (Seven Rivers/Queen)
- 2) Injection interval: Perfs 3654-3772'.
- 3) Well was drilled 9/60 as a Langlie Mattix oil producer.
- 4) There are no abandoned perforations.
- 5) Next higher productive pool: Jalmat. Base of the Jalmat occurs at 3500'.

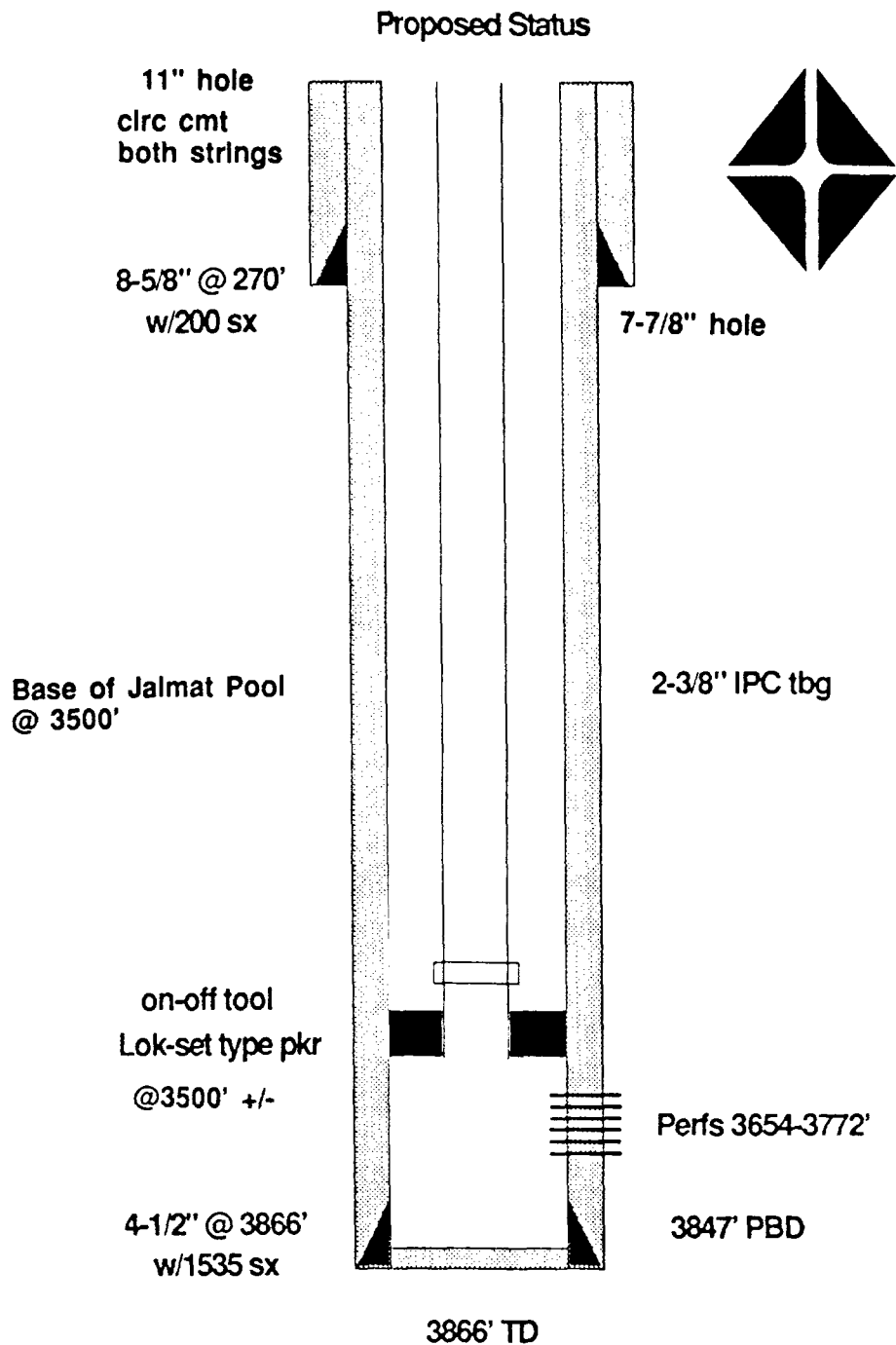
VII. PROPOSED OPERATION

- 1) Average daily rate of fluid to be injected: 400 BWPD.
- 2) The system is closed.
- 3) Average injection pressure: 731 psi.
Maximum injection pressure: 731 psi (0.2 psi/ft).
- 4) Source of injection fluid: Texaco Jal Water System. Analysis attached.

IX. PROPOSED STIMULATION

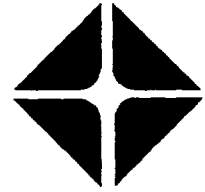
Acidize perfs 3654-3772 w/5000 gals 15% NEFE HCl w/5% micellar solvent @ 2-3 bpm @ 3000 psi in 2 stages using graded rock salt as a diverting agent between stages.

Seven Rivers Queen Unit #52

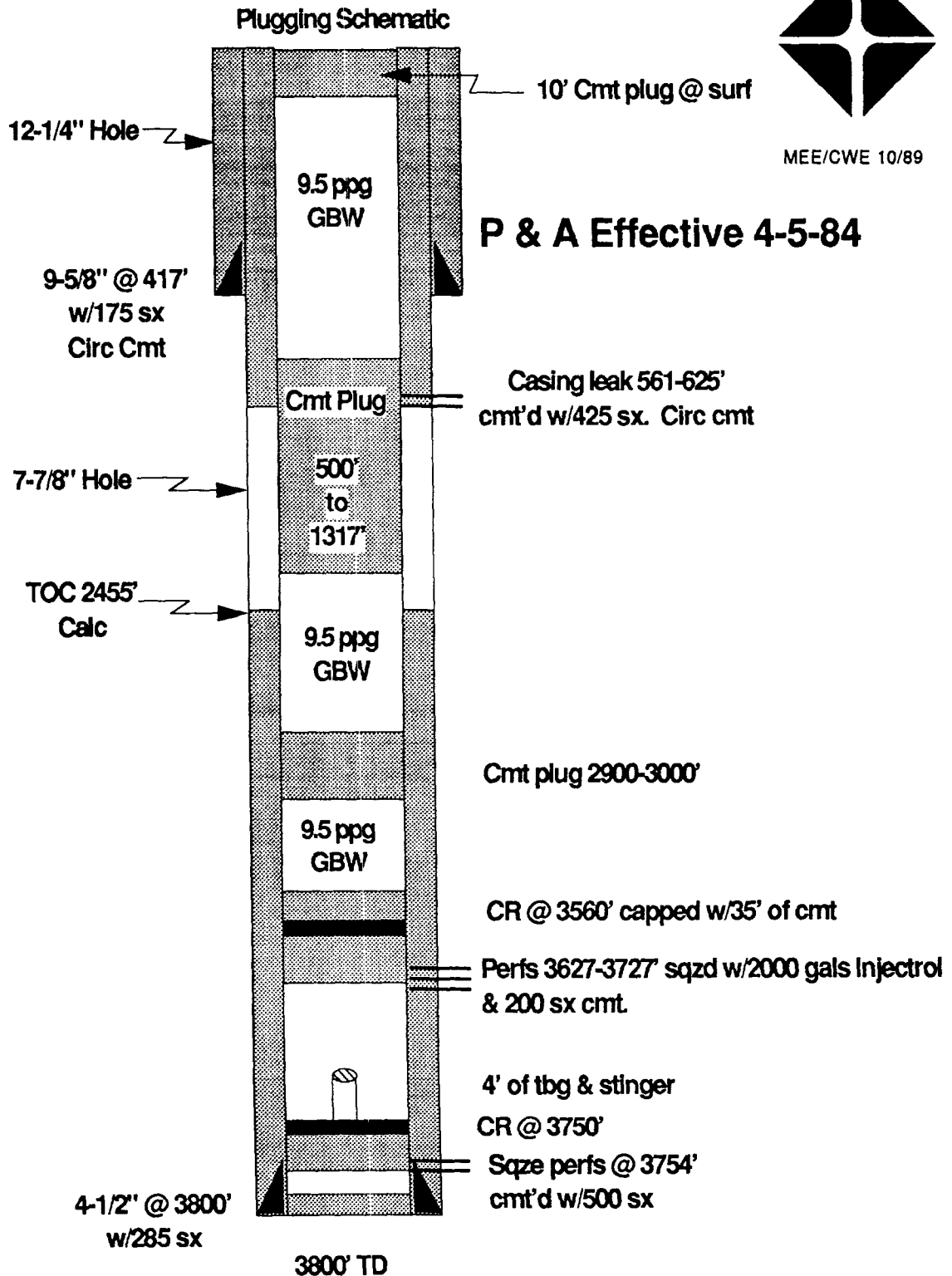


ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
WELL #52: LANGLIE MATTIX (SR/QN) POOL
LOC: 1980'FNL & 660'FEL, SEC 3, T23S, R36E, LEA CO.
COMPLETED 9/60 AS AN OIL PRODUCER.

Seven Rivers Queen Unit #53



MEE/CWE 10/89



ARCO OIL & GAS COMPANY
APPLICATION TO EXPAND SRQU WATERFLOOD PROJECT
WELL #53: LANGLIE MATTIX (SR/QN) POOL
LOC: 1980'FNL & 660'FWL, SEC 2, T23S, R36E, LEA CO.
COMPLETED 2/61 AS AN OIL PRODUCER.

709 W. INDIANA
MIDLAND, TEXAS 79701
PHONE 683-4521

RESULT OF WATER ANALYSES

TO: Mr. Steve Smith
P.O. Box 1710, Hobbs, NM

LABORATORY NO. 108927
SAMPLE RECEIVED 10-3-89
RESULTS REPORTED 10-9-89

COMPANY ARCO Oil & Gas Company LEASE Seven Rivers Queen Unit
FIELD OR POOL South Eunice
SECTION BLOCK SURVEY COUNTY Lea STATE NM

SOURCE OF SAMPLE AND DATE TAKEN:

Produced water - taken from Seven Rivers Queen Unit. 10-2-89

NO. 2 Supply water - taken @ Texaco. 10-2-89

REMARKS: _____ Queen

[illegible]

Results Reported As Milligrams Per Liter

Additional Determinations And Remarks	A comparison of the above results reveals no evidence of any incompatibility between these waters in any proportion. Therefore, these results indicate that the mixing of these waters should result in no precipitation or scaling potential.
---------------------------------------	--

Form No. 2

cc: Mr. Dave Newell, Midland
Mr. Jim Nicholson, Midland
Mr. S.M. Bucaram, Plano
Mr. Mark Wilson, Dallas
Central File System, Midland

By

Waylan C. Martin, M.A.

**ARCO OIL & GAS COMPANY
SEVEN RIVERS QUEEN UNIT #32
APPLICATION TO INJECT WATER
TABULATION OF WELL DATA FOR AREA OF REVIEW
October 1989**

#32 INJECTION INTERVAL: 3680-3730 Perfs + 3756-3785' Open Hole.
All wells which have not been previously reported (in original application)
and which penetrate the injection interval are shown.

Operator	Lease Name	Well #	Well Type	Location	Date Drilled	Total Depth	Casing Size	Casing Depth	Cement Sacks/ Top	Completion Interval
ARCO	Seven Rivers Queen Unit (SRQU)	60	AC	2605'FSL 1280'FWL 34-22S-36E	4/83	3925	8-5/8 5-1/2	305 3925	200/circ 950/850	3689-3828
		61	AC	2440'FNL 2435'FWL 34-22S-36E	3/83	3925	8-5/8 5-1/2	304 3925	200/circ 950/226	3676-3817
		62	AC	1555'FSL 2480'FWL 34-22S-36E	6/84	3903	8-5/8 5-1/2	333 3893	200/circ 825/circ	3650-3784
		63	AC	1330'FSL 1310'FWL 34-22S-36E	7/84	3911	8-5/8 5-1/2	319 3911	200/circ 800/circ	3685-3775
		69	AC	1170'FNL 1140'FEL 34-22S-36E	10/86	3900	8-5/8 5-1/2	310 3900	300/circ 850/160	3683-3826
		72	AC	1160'FNL 2630'FWL 34-22S-36E	11/86	3900	8-5/8 5-1/2	310 3900	300/circ 900/circ	3668-3816
		73	AC	1450'FNL 1250'FWL 34-22S-36E	12/87	3880	8-5/8 5-1/2	303 3880	200/circ 900/circ	3676-3850
		75	AC	180'FSL 2620'FEL 34-22S-36E	12/87	3886	8-5/8 5-1/2	295 3886	175/circ 825/circ	3692-3826

PROPOSED WELLS WITHIN AREA OF REVIEW:

ARCO	SRQU Proposed Producer	76		2475'FNL 1485'FEL 34-22S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	77		1570'FSL 1650'FEL 34-22S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	78		10'FSL 165'FEL 34-22S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3655-3805

Wells within area of review which data was previously submitted:

ARCO SRQU #20, 21, 23, 24, 25, 26, 31, 33, 34, 36, 37, 38, 46.

**ARCO OIL & GAS COMPANY
SEVEN RIVERS QUEEN UNIT #38
APPLICATION TO INJECT WATER
TABULATION OF WELL DATA FOR AREA OF REVIEW
October 1989**

#38 INJECTION INTERVAL: 3606-3712 Perfs + 3715-3785' Open Hole.
All wells which have not been previously reported (in original application)
and which penetrate the injection interval are shown.

Operator	Lease Name	Well #	Well Type	Location	Date Drilled	Total Depth	Casing Size	Casing Depth	Cement Sacks/ Top	Completion Interval
ARCO	Seven Rivers Queen Unit (SRQU)	57	AC	1500'FSL 10'FEL 34-22S-36E	1/82	3900	8-5/8" 5-1/2"	1392 3900	750/circ 1300/circ	3674-3740
		62	AC	1555'FSL 2480'FWL 34-22S-36E	6/84	3903	8-5/8 5-1/2	333 3893	200/circ 825/circ	3650-3784
		67	AC	1250'FNL 1415'FEL 3-23S-36E	6/85	3872	8-5/8 5-1/2	325 3872	200/circ 1525/circ	3661-3754
		68	AC	160'FNL 1310'FWL 2-23S-36E	9/86	3865	8-5/8 5-1/2	387 3865	285/circ 1100/circ	3654-3797
		74	AC	1210'FNL 2390'FEL 3-23S-36E	1/88	3880	8-5/8 5-1/2	297 3880	175/circ 835/circ	3686-3821
		75	AC	180'FSL 2620'FEL 34-22S-36E	12/87	3886	8-5/8 5-1/2	295 3886	175/circ 825/circ	3692-3826
Meridian	Otis Jones	2	AC	1650'FSL 1750'FEL 34-22S-36E	1/82	3670	9-5/8 7	423 3670	375/surf 550/1650 calc	3223-3561

PROPOSED WELLS WITHIN AREA OF REVIEW:

ARCO	SRQU Proposed Producer	76		2475'FNL 1485'FEL 34-22S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	77		1570'FSL 1650'FEL 34-22S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	78		10'FSL 165'FEL 34-22S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	79		1400'FNL 10'FWL 2-23S-36E	11/89	3850	8-5/8 4-1/2	300 3850	300/circ 1100/circ	3645-3795

Wells within area of review which data was previously submitted:

ARCO SRQU # 26, 30, 31, 32, 33, 36, 37, 39, 44, 45, 46, 47, 52.

**ARCO OIL & GAS COMPANY
SEVEN RIVERS QUEEN UNIT #44
APPLICATION TO INJECT WATER
TABULATION OF WELL DATA FOR AREA OF REVIEW
October 1989**

#44 INJECTION INTERVAL: 3652-3757 Perfs.

All wells which have not been previously reported (in original application)
and which penetrate the injection interval are shown.

Operator	Lease Name	Well #	Well Type	Location	Date Drilled	Total Depth	Casing Size	Casing Depth	Cement Sacks/ Top	Completion Interval
ARCO	Seven Rivers Queen Unit (SRQU)	57	AC	1500'FSL 10'FEL 34-22S-36E	1/82	3900	8-5/8" 5-1/2"	1392 3900	750/circ 1300/circ	3674-3740
		64	WIW	2310'FNL 660'FWL 2-23S-36E	6/84	3816	8-5/8" 5-1/2"	335 3816	175/circ 875/circ	3654-3735
		67	AC	1250'FNL 1415'FEL 3-23S-36E	6/85	3872	8-5/8" 5-1/2"	325 3872	200/circ 1525/circ	3661-3754
		68	AC	160'FNL 1310'FWL 2-23S-36E	9/86	3865	8-5/8" 5-1/2"	387 3865	285/circ 1100/circ	3654-3797
		71	AC	1310'FNL 2480'FEL 2-23S-36E	10/86	3870	8-5/8" 5-1/2"	300 3870	400/circ 1200/circ	3630-3784
	Plugging Schematic Attached	53	P&A	1980'FNL 660'FWL 2-23S-36E	2/61	3800	9-5/8" 4-1/2"	417 3800	175/circ 285/2455	3627-3727

PROPOSED WELLS WITHIN AREA OF REVIEW:

ARCO	SRQU Proposed Producer	78		10'FSL 165'FEL 34-22S-36E	11/89	3850	8-5/8" 4-1/2"	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	79		1400'FNL 10'FWL 2-23S-36E	11/89	3850	8-5/8" 4-1/2"	300 3850	300/circ 1100/circ	3645-3795

Wells within area of review which data was previously submitted:

John Hend State JG #4 Section 2, Unit L, T23S, R36E.

ARCO SRQU # 38, 39, 40, 42, 43, 45, 46, 52, 54

**ARCO OIL & GAS COMPANY
SEVEN RIVERS QUEEN UNIT #52
APPLICATION TO INJECT WATER
TABULATION OF WELL DATA FOR AREA OF REVIEW
October 1989**

#52 INJECTION INTERVAL: 3654-3772 Perfs.

All wells which have not been previously reported (in original application)
and which penetrate the injection interval are shown.

Operator	Lease Name	Well #	Well Type	Location	Date Drilled	Total Depth	Casing Size	Casing Depth	Cement Sacks/ Top	Completion Interval
ARCO	Seven Rivers Queen Unit (SRQU)	64	WIW	2310'FNL 660'FWL 2-23S-36E	6/84	3816	8-5/8" 5-1/2"	335 3816	175/circ 875/circ	3654-3735
		67	AC	1250'FNL 1415'FEL 3-23S-36E	6/85	3872	8-5/8" 5-1/2"	325 3872	200/circ 1525/circ	3661-3754
		68	AC	160'FNL 1310'FWL 2-23S-36E	9/86	3865	8-5/8" 5-1/2"	387 3865	285/circ 1100/circ	3654-3797
		74	AC	1210'FNL 2390'FEL 3-23S-36E	1/88	3880	8-5/8" 5-1/2"	297 3880	175/circ 835/circ	3686-3821
	Plugging Schematic Attached	53	P&A	1980'FNL 660'FWL 2-23S-36E	2/61	3800	9-5/8" 4-1/2"	417 3800	175/circ 285/2455	3627-3727
Rasm. Op. State A/AC-1		119	WIW	1295'FSL 1295'FEL 3-23S-36E	2/84	3780	8-5/8" 5-1/2"	459 3780	275/surf 875/surf calc	3637-3742

PROPOSED WELLS WITHIN AREA OF REVIEW:

ARCO	SRQU Proposed Producer	78		10'FSL 165'FEL 34-22S-36E	11/89	3850	8-5/8" 4-1/2"	300 3850	300/circ 1100/circ	3655-3805
ARCO	SRQU Proposed Producer	79		1400'FNL 10'FWL 2-23S-36E	11/89	3850	8-5/8" 4-1/2"	300 3850	300/circ 1100/circ	3645-3795

Wells within area of review which data was previously submitted:

Hendrix State JG #4 Section 2, Unit L, T23S, R36E.

Rasm. Op. State A/AC-1 #61, 63, 69.

ARCO SRQU # 38, 44, 45, 46, 47, 50, 51, 54.

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



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

OIL CONSERVATION DIVISION

RECEIVED

'89 OCT 26 AM 9 59

GARREY CARRUTHERS
CLERK

POST OFFICE BOX 1080
HOBBS, NEW MEXICO 87401-1080
(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:

Arco oil & Gas Co. Silver Lake Survey Unit
Operator Lease & Well No. Unit S-T-R

32-2 34-22-36
38-P 34-22-36
44-E 2-23-36
52-743-23-36

and my recommendations are as follows:

OK

Yours very truly,

Jerry Sexton
Jerry Sexton
Supervisor, District 1

/ed