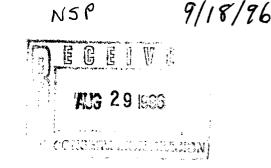


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August 28, 1996

Attn: Mr. William J. LeMay NMOCD 2040 South Pacheco Santa Fe, New Mexico Mr. J. T. Sexton NMOCD P. O. Box 1980 Hobbs, New Mexico 88240

Re: Application for Non-Standard Gas Proration Unit & Unorthodox Location C. H. Weir "B" #5 Unit G, Sec. 11, T20S, R37E, Lea County, New Mexico

Dear Mr. LeMay and Mr. Sexton:

Texaco Exploration & Production Inc., respectfully requests administrative approval for a nonstandard 280 acre gas proration unit and an unorthodox well location in the Eumont Gas Pool for the C. H. Weir "B" #5. The well is currently completed in the Glorieta formation, but it has not produced since 1987.

Attached is NMOCD form C102 identifying the proposed lease on the subject 280 acre proration unit.

Texaco has notified offset operators of this application by copy of this application package sent by certified mail. If you need further information concerning this matter, please contact me at (505) 397-0413. Thank you for your consideration of this proposal.

Sincerely,

Britten Mr. Juin

Britton M. McQuien Engineer Texaco E&P Inc.

enc

cc: Offset Operators

DISTRICT State of New Mexico Form C-102 P.O. Box 1980, Hobbs, NM 88241-1980 Energy, Minerals and Natural Resources Department Revised February 10,1994 DISTRICT II Instructions on back P.O. Box Drawer DD, Artesia, NM 88211-0719 OIL CONSERVATION DIVISION Submit to Appropriate District Office DISTRICT III P.O. Box 2088 State Lease - 4 Copies 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088 Fee Lease - 3 Copies DISTRICT IV P.O. Box 2088, Santa Fe, NM 87504-2088 AMENDED REPORT WELL LOCATION AND ACREAGE DEDICATION PLAT ³ Pool Name API Number Pool Code 30 025 06062 76480 EUMONT; YATES-7 RVRS-QUEEN (PRO GAS) ⁵ Property Name Well No. Property Code WEIR, C. H. -B-5 011132 ⁸ Operator Name **OGRID** Number Elevation TEXACO EXPLORATION & PRODUCTION INC. 022351 ¹⁰ Surface Location North/South Line Ul or lot no. Section Township Range Lot.Idn Feet From The Feet From The East/West Line County G 20S 37E 1980 NORTH 1650 11 EAST LEA 11 Bottom Hole Location If Different From Surface North/South Line UI or lot no. Section Township Lot.Idn Feet From The Feet From The East/West Line Range County 12 Dedicated Acres 13 Joint or Infill 14 Consolidation Code 15 Order No. 280 No NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLET: ON UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED. OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION 17 OPERATOR CERTIFICATION Lewis B. Burlescy, Inc. 16 I hereby certify that the information Christmas Com. Al p contained herein is true and complete to the 160' FNINL R-520 best of my knowledge and belief Singo Operating, Inc. 0 Eument bas long East Exment Unit 320'ENL-660 'EEL FNL 160 ALTES .d: 11-25-56 Signature Eunest Cillen Spod: 11-16-53 анницици 980 Ω. tos the WF praise Printed Name in the East Eur Paula S. Ives Unit Area (R-2894) Position which comprises only Engineering Assistant FEL KA 1650 Date Sec. 8/15/96 18 SURVEYOR CERTIFICATION Britt Stags & Com. #2 I hereby certify that the well location shown 1650 FSOLL Spul: 7-2-74 on this plat was plotted from field notes of Eument bas long Texaco Exploration actual surveys made by me or under my + Production Inc. C. H. Wir B" dy supervision, and that the same is true and 逆 correct to the best of my knowledge and 2044 4 434-660 481 1320 acres compen Spud: 12-2-60 belief. the sw/ up Eses. 10 Eunont bas lang/stic Date Surveyed and the SElyst Sec. 10 Under NSP-553 A approved by For the 160 Acres Signature & Seal of 12-4910 comprising the Professional Surveyor SE/4 Sect. 11 Esment Alunder 1- 1973. Certificate No. 330 660 990 1320 1650 1980 2310 2640 2000 1500 0 1000 500 0

DeSoto/Nichols 3/94 ver 1.10

	Is your <u>RETURN ADDRESS</u> completed on the reverse side?	 SENDER: Complete items 1 and/or 2 for additional services Complete items 3, 4a, and 4b. Complete items 3, 4a, and 4b. Print your name and address on the reverse of the card to you. Attach this form to the front of the mailpiece, or or permit. Write "Return Receipt Requested" on the mailpiece. The Return Receipt Requested" on the mailpiece delivered. Article Addressed to: Conolo I nL. 10. Desta Dr., Suite 1000 Midland, Texas 79705 Beceived By: (Print Name) Bignature addressee or Astronomy PS Form 3811, December 1994 	is form so that we n the back if space below the article was delivered and	4a. Article Nu 4b. Service T Registered Express M Return Reco 7. Date of Del Addressee's and fee is p	ype d Mail eipt for Merchandise Wery 2 S Address (Only if r	e (for an e's Address t Delivery er for fee.	Thank you for using Return Receipt Service.
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s your <u>F</u>	6. Signature: (Addressee or Agent) Xulture fatur			
-	PS Form 3811 , December 1994		Domestic Return Receipt	

side	SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number.		I also wish to receive the following services (for an extra fee): 1.		Receipt Service.
ADDRESS completed on the reverse	 The Return Receipt will show to whom the article was delivered and delivered. 3. Article Addressed to: 0 X Y USA Inc. P. O. Box 50250 Midland, TX 79702 	4a. Article N 4b. Service Registere Express Return Re	Type red Mail Insured Receipt for Merchandise		using Return
Is your <u>RETURN ADI</u>	5. Received By: (Print Name) 6. Signature: (Addressee or Agent) X Apst Thoma PS Form 3811 , December 1994	7. Date of Delivery 8. Addressee's Address (Only if requeste and fee is paid) Domestic Return Rece			Thank you for

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I also wish to receive the SENDER: following services (for an Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. extra fee): Print your name and address on the reverse of this form so that we can 1. Addressee's Address Attach this form to the front of the mailpiece, or on the back if space does not Serv rever 2. C Restricted Delivery permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date Consult postmaster for fee. the Rece delivered. 4a. Article Number 6 3. Article Addressed to: E Apache Corporation 2000 Post Oak Blud., Suite 100 RETURN ADDRESS completed 4b. Service Type Certified Registered 🗋 insured Express Mail Houston, Texas 7)056 🗆 Return Receipt for Merchandise 🖾 ÇOD 7. Date of Delivery hank reau Kted TOnly 8. Addressee's Address 5. Received By: (Print Name) and fee is paid) 6. Signature: Addressee or Àα your. **Domestic Return Receipt** PS Form 3811, December **`1994** ide? SENDER: RMM I also wish to receive the Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. following services (for an Print your name and address on the reverse of this form so that we can return this extra fee): card to you. Servic Attach this form to the front of the mailpiece, or on the back if space does not 1. C Addressee's Address permit. Write "Return Receipt Requested" on the mailpiece below the article number. 2. C Restricted Delivery the The Return Receipt will show to whom the article was delivered and the date ceipt delivered. Consult postmaster for fee. b 3. Article Addressed to: 4a. Article Number pleted Sharon Beaver En 4014 Lehigh Drive Midland, Texas 79702 4b. Service Type Rel Registered Certified **6**ujsn Express Mail Insured **RETURN ADDRES** 🗋 Return Receipt for Merchandise 🔲 COD 5 7. Date of Delivery 8. Addressee's Address (Only stigguested Thank 5. Received By: (Print Name) and fee is paid) AUG 22 1996 6. Signature: (Addressee or Agent) ls your Х **Domestic Return Receipt** PS Form 3811, December 1994 SENDER: side. Complete items 1 and/or 2 for additional services. BMM Complete items 3, 4a, and 4b. I also wish to receive the Print your name and address on the reverse of this form so that we can return this following services (for an card to you. Attach this form to the front of the mailpiece, or on the back if space does not extra fee): Write "Return Receipt Requested" on the mailpiece below the article number.
The Return Receipt will show to whom the article was delivered and the date delivered. 1. 🛛 Addressee's Address Ë 2.
Restricted Delivery 5 Consult postmaster for fee. 3. Article Addressed to: RETURN ADDRESS completed 4a. Article Number Atlantic Richfield Company P.O. Box 1610 Midland, Texas 79702 4b. Service Type Be C Registered Certified Express Mail using Insured Return Receipt for Merchandise COD 7. Date of Delivery 5 hank you 33 DB. 5. Received By: (Print Name) 8. Addressee's Address (Only if requested and fee is paid) 6. Signature: (Addressee or Agent) VOUL Х

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STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION HOBBS DISTRICT OFFICE

9/3/96

GOVERNOR

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

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

RE:	Proposed:
	MC
	DHC
	NSL
	NSP
	SWD
	WFX
	РМХ

Gentlemen:

I have examined the application for the:

11-205-37e Unit - R Opérator lease Well No.

and my recommendations are as follows:

Youns very truly extor PY Supervisor, District 1

/ed