



# NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON  
Governor  
Jennifer A. Salisbury  
Cabinet Secretary

Lori Wrotenbery  
Director  
Oil Conservation Division

## FINAL NOTICE

### CERTIFIED MAIL

January 22, 2001

CFM OIL COMPANY  
P.O. BOX 1176  
ARTESIA, NM. 88211-1176

### RE: INACTIVE NON-COMPLIANCE WELLS

Dear Louis :

During our meeting of 12/22/00 it was stressed that the Oil Conservation Division (OCD) currently is addressing all inactive non-compliance wells as a top priority statewide project. A mass mail out was made on May 11, and September 8, 2000 requesting information from each operator that had inactive wells.

To date, I have not received the work plan as discussed during our meeting.

By copy of this letter, the OCD director is requested to schedule a "Show Cause Hearing" to allow you the opportunity to appear and to show way a shut in order, order to plug and abandon all inactive non-compliance wells and/or to call for the forfeiture of your statewide bond is not issued. If your bond is called you can no longer operate in the State of New Mexico.

**The "Show Cause Hearing" will be stayed if an aggressive plan being detailed and specific as to type of work and time frame to bring all non-compliance wells into compliance's received in this office within 15 days of receipt of this letter.**

Attached is the latest (11/16/00) OCD list of inactive non-compliance wells for your company a copy of which was given to you at our meeting.

TIM W. GUM  
*Tim W. Gum*  
DISTRICT II SUPERVISOR  
OIL CONSERVATION DIVISION

XC: LORI WROTENBERY ---- DIRECTOR  
OCD ATTORNEY  
ATTACHMENT

BEFORE EXAMINER STOONER
OIL CONSERVATION DIVISION
OCD EXHIBIT NO. <u>52</u>
CASE NO. <u>12811</u>

52

API #	Type	Last Production/ Injection	Well Name and Number	ULSTR	FNS	FEW
30-015-02858	O	05-1998	ATLANTIC STATE #001	J-02-17S-29E	2310S	1650E
30-015-01616	O	12-1995	BLAKE STATE #001	P-30-17S-28E	330S	990E
30-015-02806	I	05-1996	FOREST POOL UNIT	L-35-16S-29E	2120S	520W
30-015-02812	I	07-1995	FOREST POOL UNIT	J-35-16S-29E	1650S	2310E
30-015-21823	O	09-1998	GILLESPIE STATE #002	C-27-17S-28E	990N	1650W
30-015-22616	O	11-1998	GILLESPIE STATE #012	A-27-17S-28E	330N	330E
30-015-00243	O	06-1995	KINDLE #002	A-26-18S-26E	330N	330E
30-015-02857	O	02-1983	MORGAN STATE #003	2-02-17S-29E	660N	1650E
30-015-06102	O	07-1995	PLATT #001	M-26-18S-26E	75S	125W
30-015-00247	O	12-1991	PLATT #002	K-26-18S-26E	2310S	2310W
30-015-24064	O	12-1995	SRC STATE #001	N-23-17S-28E	330S	1650W
30-015-23570	O	06-1998	STATE B 1111 #019	A-22-17S-28E	990N	330E
30-015-23571	O	11-1997	STATE B 1111 #020	A-22-17S-28E	330N	330E
30-015-23572	O	11-1997	STATE B 1111 #021	A-22-17S-28E	330N	990E
30-015-23009	O	10-1997	STATE 4-5 #005	K-18-19S-28E	1810S	2373W
30-005-62761	O	12-1995	VALLEY B ST #001	H-27-10S-26E	2320N	660E
30-015-00235	O	01-1979	WILLIAMS #002	D-25-18S-26E	990N	990W
30-015-00318	O	10-1997	WILLIAMS #003	B-25-18S-26E	330N	2310E
30-015-00236	I	12-1992	WILLIAMS #004	F-25-18S-26E	1650N	2310W
30-015-00237	O	12-1992	WILLIAMS #005	C-25-18S-26E	990N	1980W
30-015-00238	O	09-1978	WILLIAMS #006	B-25-18S-26E	990N	2623E
30-015-22166	O	10-1998	WOLF #001	M-23-17S-28E	990S	330W
30-005-62250	O	04-1997	YATES BROWN ST #001	I-27-10S-26E	2310S	330E
30-015-02869	O	12-1992	DUBLIN #002	G-03-17S-29E	1980N	1980E
30-015-02871	O	01-1978	DUBLIN #003	2-03-17S-29E	330N	1650E

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**

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<b>Total Postage &amp; Fees</b>	<b>\$ 3.74</b>

Postmark  
Here

Recipient's Name (Please Print Clearly) (to be completed by mailer)

**CFM OIL COMPANY**  
 Street, Apt. No., or PO Box No.  
**PO BOX 1176**  
 City, State, and ZIP+4<sup>®</sup>  
**ARTESIA NM 88211-1176**

PS Form 3800, February 2000

See Reverse for Instructions

**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:

**CFM OIL COMPANY  
 PO BOX 1176  
 ARTESIA NM 88211-1176**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

*Judy Fr/Hou* 1-26-01

C. Signature

*[Handwritten Signature]*

- Agent
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4. Restricted Delivery? (Extra Fee)

- Yes

2. Article Number (Copy from service label)

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PS Form 3811, July 1999

Domestic Return Receipt

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