



ALPHA TWENTY-ONE PRODUCTION COMPANY

POST OFFICE BOX 1206
JAL. NEW MEXICO 88252

505/395-3056

December 7, 1984

Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87501

DEC 26 1984

RECEIVED

RE: Gregory "A" Federal No. 3
660' FNL & 660' FWL,
Sec. 33, T-25-S, R-37-E,
Lea County, New Mexico

Case 8462

Gentlemen:

Enclosed for your review and approval find our Application for Authorization to Dispose Produced Water into a Zone Non-Productive of Oil and Gas for the above captioned well.

The proposed salt water disposal well is currently temporarily abandoned. Records show that the well was originally drilled to 4000', but plugged back to 3240' with 275 sacks of cement. The well was then produced in the Queen formation through open-hole from 3085' to 3240' as an oil well in the Langlie Mattix pool.

Alpha Twenty-One Production Company proposed to re-enter the well and drill out the cement to the original TD of 4000'. We would then log, set a liner from 2900' to 4000', cement, perforate, and acidize with 1000 gallons. Attached please find an injection well data sheet showing the well after re-entry operations are complete and ready for disposal.

The produced water for disposal will come from our El Paso Tom Federal lease, Sec. 33, T-25-S, R-37-E, Lea County, New Mexico. The average rate should be 23 BW/hour with a maximum rate of 549 BWPD. We can expect the average volume to be 300 BWPD with a maximum volume of 500 BWPD. The system will be closed using a production packer. The average injection rate anticipated will be 800 psi with a maximum rate of 1200 psi. The non-productive zone for disposal will be the San Andres, but since there are no producing San Andres well within a two-mile radius, chemical analysis could not be obtained for the San Andres formation, however chemical analysis for the produced water to be disposed is attached.

December 7, 1984

Geological information indicates that the San Andres formation is a dolomite approximately 1300 feet thick at a depth of 3700'. Information also indicates that the fresh water in the area is sparsly located and not plentiful and is usually found in the Red Bed formation. After checking with the New Mexico State Engineer's office and upon a visual inspection, the only fresh water well found within a one-mile radius is owned by Clyde Cooper. This water well is located in the NE, NE, SW, NE of Section 33 and is currently nonproducing, henceforth, no chemical analysis of the fresh water could be obtained.

After a thorough search of the records at the New Mexico Oil Conservation District office in Hobbs, no record of logs for the captioned well could be found on file, but, as stated before, the well will be logged prior to perforating and a copy of the logs will be made available for public record.

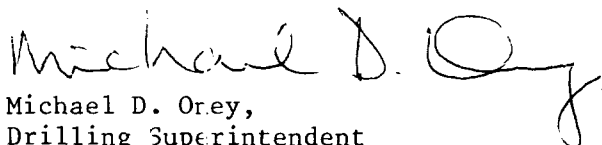
All available geological and engineering data has been examined and no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water has been found.

Attached for your review and records, please find the following:

- 1.) A map that identifies all wells and leases within two miles of the proposed injection well. A one-half mile radius circle has been drawn around the proposed injection well (the area of review).
- 2.) A tabulation of data on all wells of public record within the area of review which penetrate the disposal zone.
- 3.) Chemical analysis of produced water to be disposed.
- 4.) A data sheet and schematic of the proposed disposal well.
- 5.) A copy of the legal advertisement publication.
- 6.) Copies of the return receipts on certified mailings offered as proof of notification to offset operators and surface owner.

If any further information is required for the administrative approval of this Application for Authorization to Dispose Produced Water, please contact me. Thank you for your consideration and cooperation in this matter.

Respectfully yours,


Michael D. Orey,
Drilling Superintendent

MDO/tic
Enclosures

December 7, 1984

cc: Oil Conservation Division
P.O. Box 1980
Hobbs, NM 88240

Bureau of Land Management
Carlsbad Resource Area
P.O. Box 1778
Carlsbad, NM 88240

Alpha Twenty-One Production Co.
200 W. Illinois Street, Suite 200
Midland, TX 79701
ATTN: Mr. Tom Phipps

Surface Owner:

✓ Mrs. Nadine Owen
909 W. Taos
Hobbs, NM 88240

Offset Operators:

✓ Arco Oil & Gas Company
P.O. Box 1710
Hobbs, NM 88240

✓ El Paso Natural Gas Co.
1800 Wilco Building
Midland, TX 79701

✓ Gulf Oil Corporation
P.O. Box 670
Hobbs, NM 88240

✓ Sun Exploration & Prod. Co.
P.O. Box 1861
Midland, TX 79702

✓ Lewis B. Burleson, Inc.
P.O. Box 2479
Midland, TX 79702

✓ Greathouse & Lovelady Oil & Gas, Inc.
P.O. Drawer 2666
Midland, TX 79701

✓ Doyle Hartman
P.O. Box 10426
Midland, TX 79702

✓ Union Texas Petroleum Corp.
1300 Wilco Building
Midland, TX 79701

APPLICATION FOR AUTHORIZATION TO INJECT

Case 5402

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

2. Operator: ALPHA TWENTY-ONE PRODUCTION COMPANY

Address: P.O. Box 1206 Jal, New Mexico 88252

Contact party: Michael D. Oney Phone: 505-395-3056

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.

4. Is this an expansion of an existing project? ☐ yes ☒ no
If yes, give the Division order number authorizing the project _____

5. 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.

* 6. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

VIII. Attach appropriate 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.

IX. Describe the proposed stimulation program, if any.

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

BA
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.

BA
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: Michael D. Oney Title Drilling Superintendent

Signature: Michael D. Oney Date: 12-10-84

* 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.

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.

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Case 8462

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage
Application qualifies for administrative approval? ☒ yes ☐ no
- II. Operator: ALPHA TWENTY-ONE PRODUCTION COMPANY
Address: P.O. Box 1206 Jal, New Mexico 88252
Contact party: Michael D. Oney Phone: 505-395-3056
- III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? ☐ yes ☒ no
If yes, give the Division order number authorizing the project _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- * VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- VIII. Attach appropriate 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.
- IX. Describe the proposed stimulation program, if any.
- X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)
- XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground 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: Michael D. Oney Title Drilling Superintendent
Signature: Michael D. Oney Date: 12-10-84
- * 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.

INJECTION WELL DATA SHEET

ALPHA TWENTY-ONE PRODUCTION COMPANY

GREGORY 'A' FEDERAL

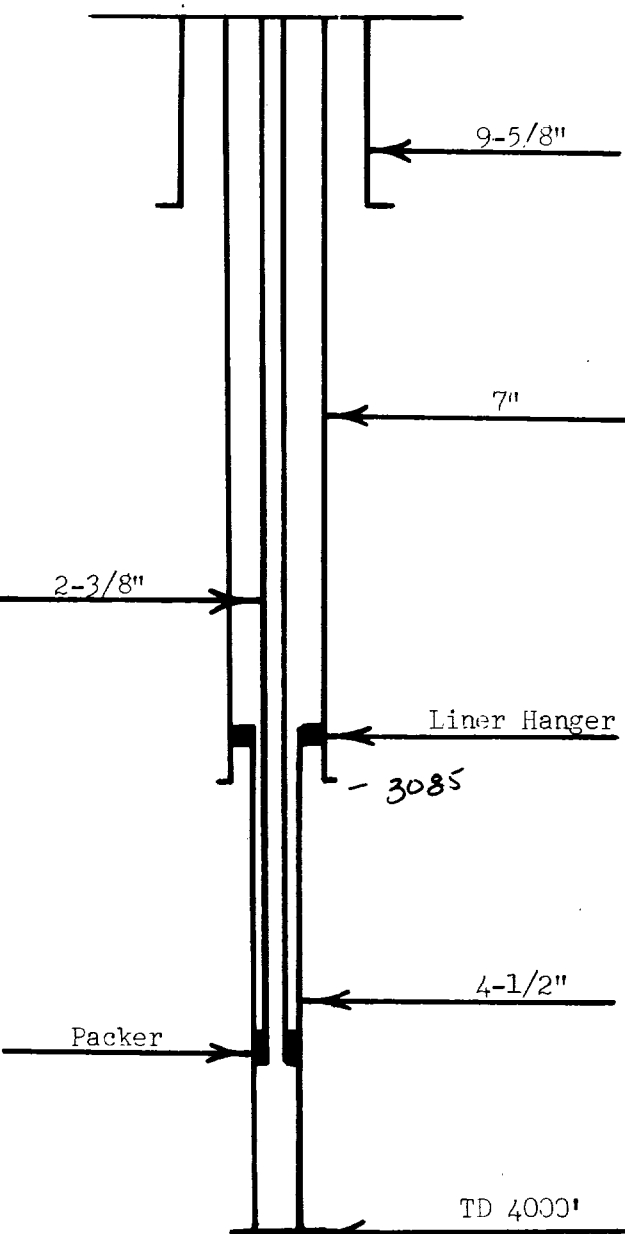
OPERATOR

LEASE

3 660' FNL-660'FWL
WELL NO. FOOTAGE LOCATION33
SECTIONT25 South
TOWNSHIP37 East
RANGE

Lea County, New Mexico

Schematic



Tabular Data

Surface Casing

Size 9-5/8 " Cemented with 300 sx.TOC Surface feet determined by CirculatedHole size 12-1/4"

Intermediate Casing

Size 7 " Cemented with 150 sx.TOC 1839 feet determined by CalculatedHole size 8-3/4"

Long string--Liner

Size 4-1/2 " Cemented with 79 sx.TOC 2900 feet determined by CalculationHole size 6-1/8"Total depth 4000'

Injection interval

3700 feet to 4000 feet
perforated or open-hole, indicate which)Tubing size 2-3/8" lined with plastic set in a
(material)Knickel plated Baker AD-1 packer at 3600 feet
(brand and model)

(or describe any other casing-tubing seal).

Other Data

1. Name of the injection formation San Andres

2. Name of Field or Pool (if applicable) _____

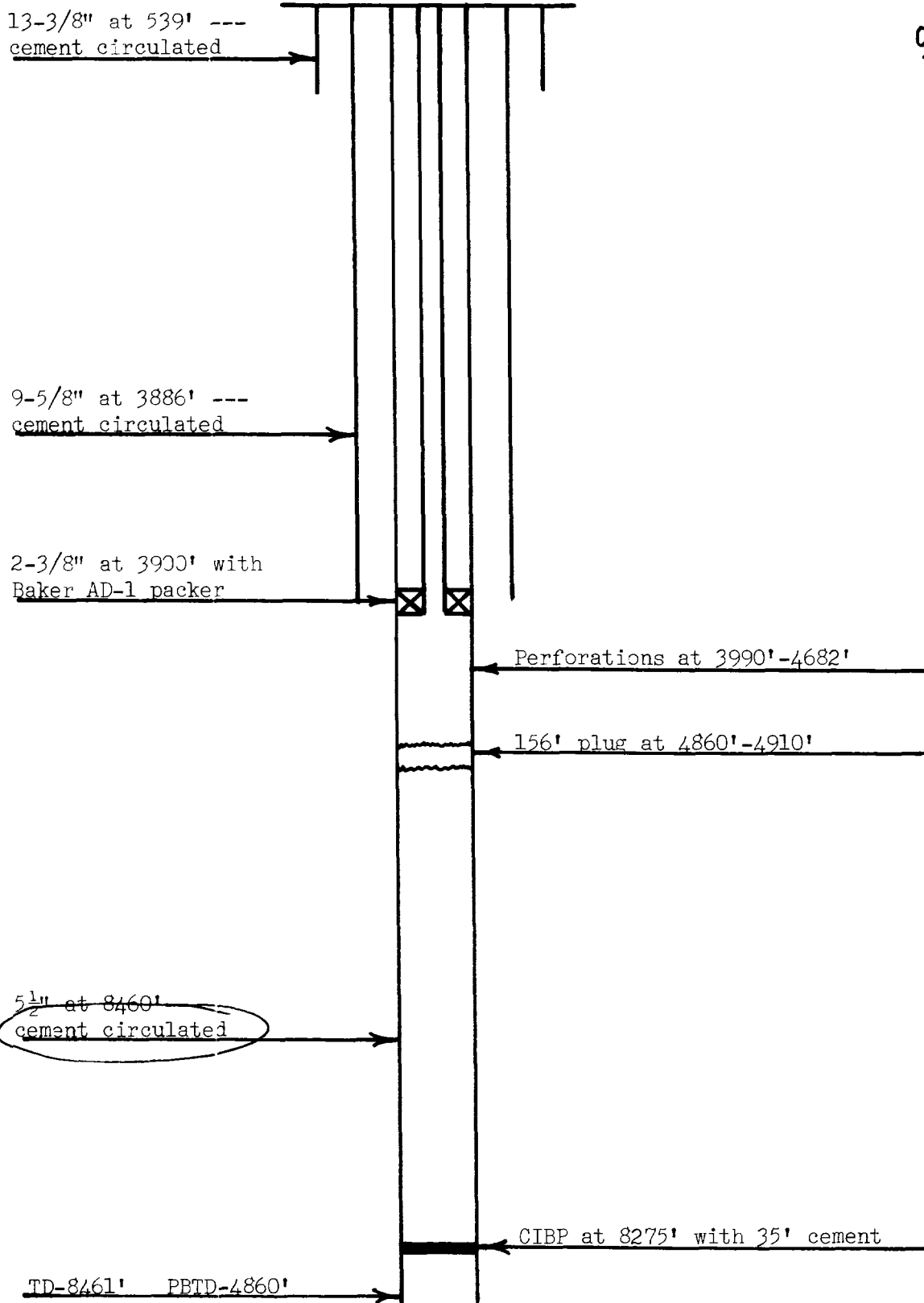
3. Is this a new well drilled for injection? ☐ Yes ☒ NoIf no, for what purpose was the well originally drilled? Gas well

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) _____

Open Hole 3085'-3240'5. Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. Jalmat (Yates/Seven Rivers) 2450' Langlie-Mattix (Seven Rivers/Queen)2900' Crosby (Devonian) 8150'

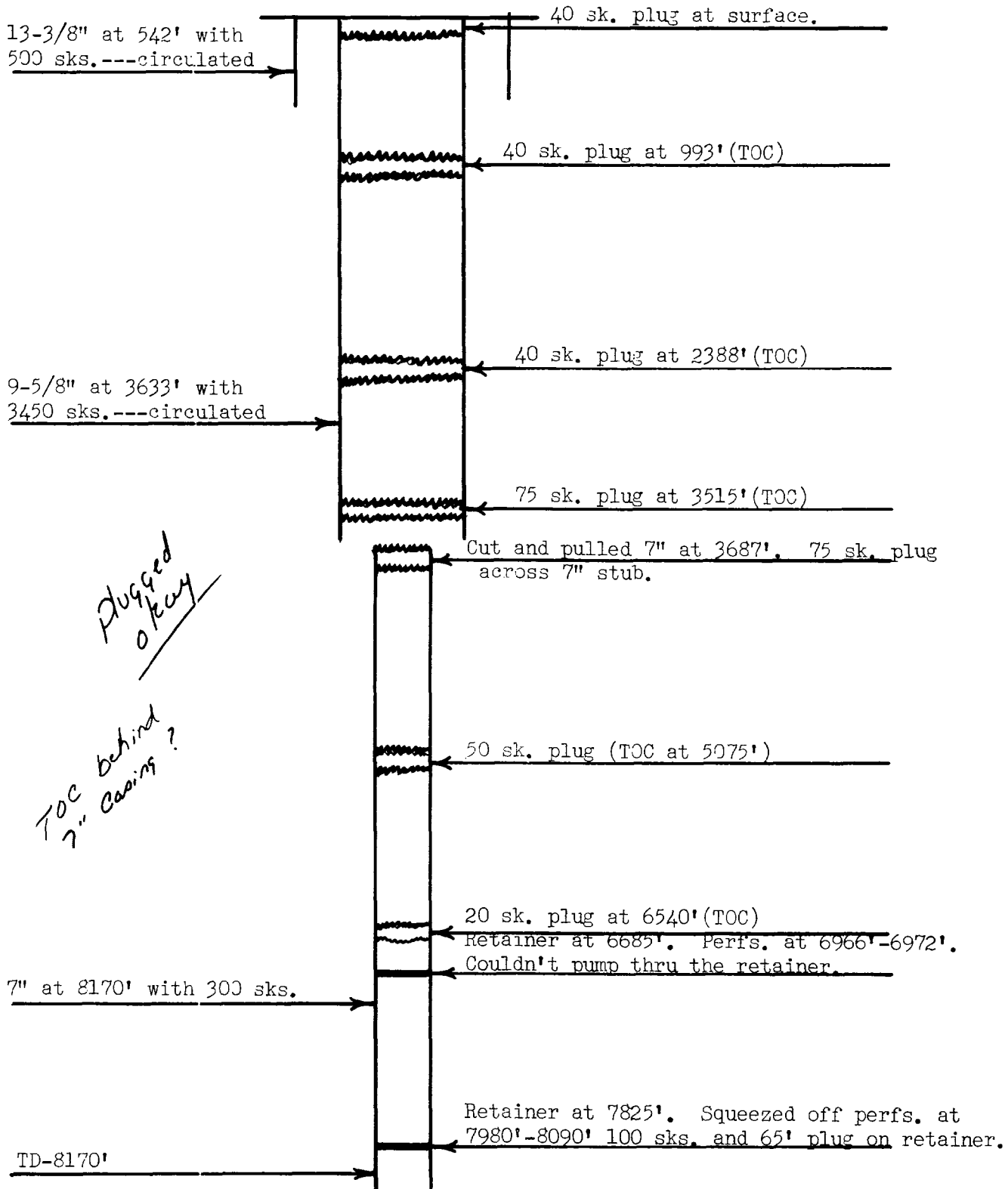
GREGORY FEDERAL #4 SWD.
Union Texas Petroleum Corp.
Unit K 1980' FSL-1980' FWL
Section 33-T25S-R37E
Elevation: 3008' DF

okay



GREGORY FEDERAL #2-Y
 El Paso Natural Gas Co.
 Unit L 760' FNL-1650' FWL
 Section 33-T25S-R37E
 Elevation: 3002' GL

*Unit letter?
 does not coincide
 with footages.*



Drilled in 1956.

COOK # 3
Lewis Burleson, Inc.
Unit O 660' FSL-1905' FEL
Section 28-T25S-R37E
Elevation: 3001' GL

11-3/4" at 512' with
350 sacks--circulated

8-5/8" set at 3632' with
450 sacks

*5 1/2" casing?
TOC - behind 5 1/2"*

Set 100' plug at 3525'-3425'.

Perfs. at 4236'-4576' (dry). Cutoff and pulled
5 1/4" casing at 3525'. 100' plug set at 4007'-3907'
inside 5 1/2".

Ran 5 1/2" casing to 4970'. Cemented with 325 sacks.
TOC at 3630'.

Cutoff and pulled 5 1/2" casing at 5032'. 132' plug
inside and outside 5 1/2" casing stub at 5032'.

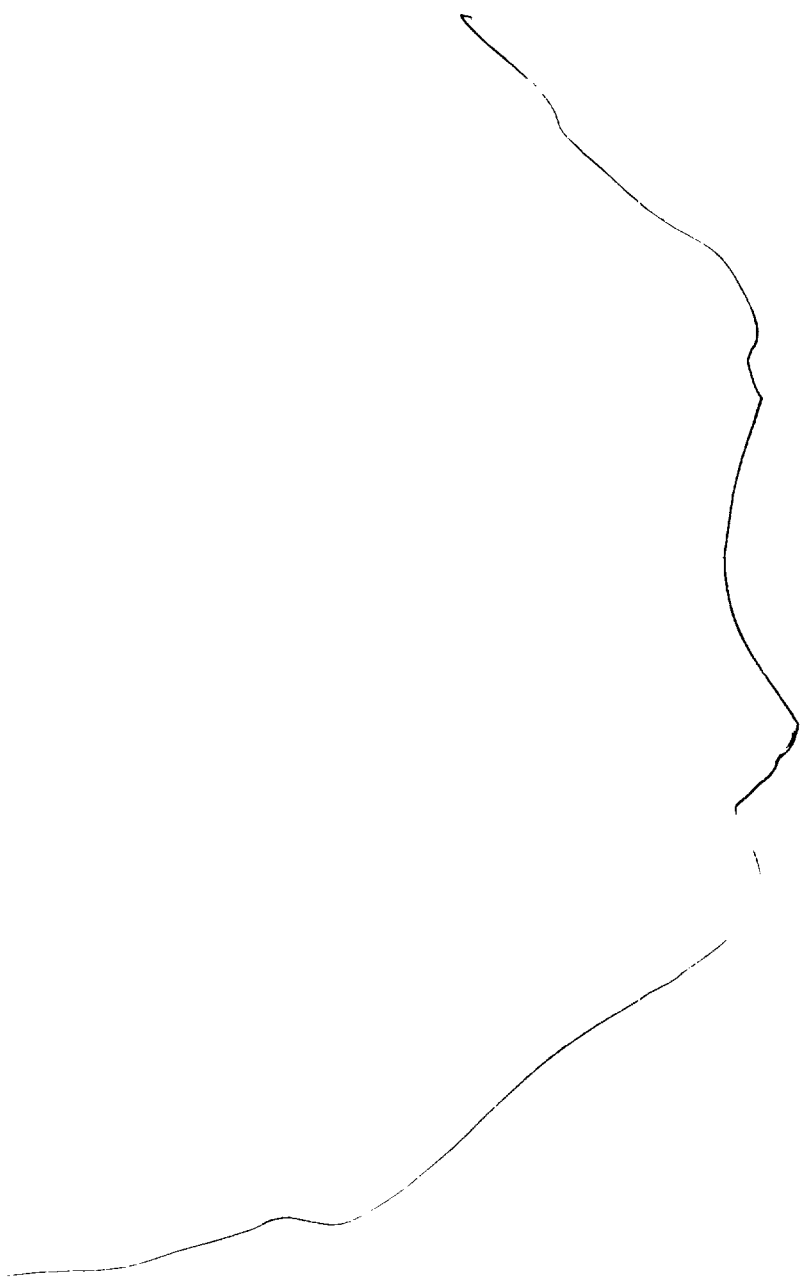
5 1/2" at 8130' with 400 sks.
TOC at 5050'
(calculated)

TD at 8130'

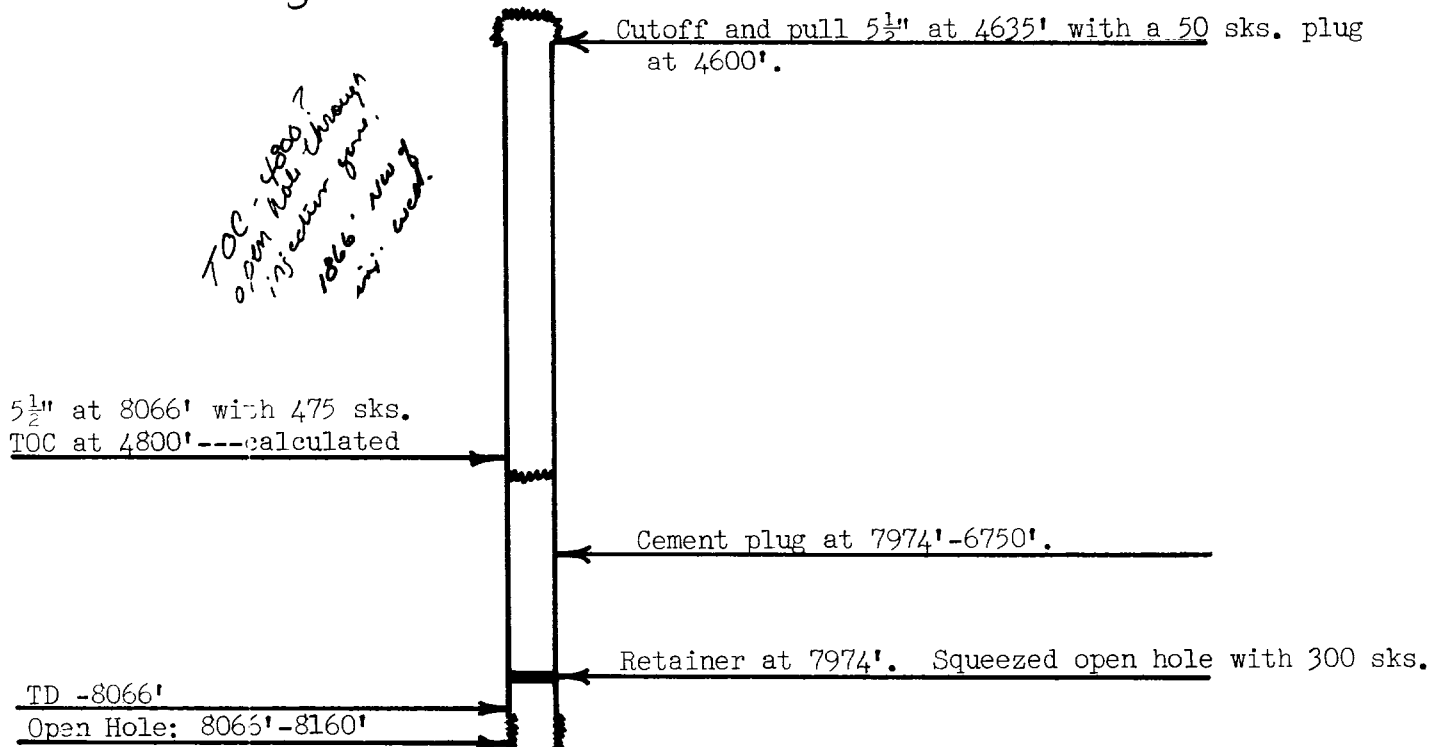
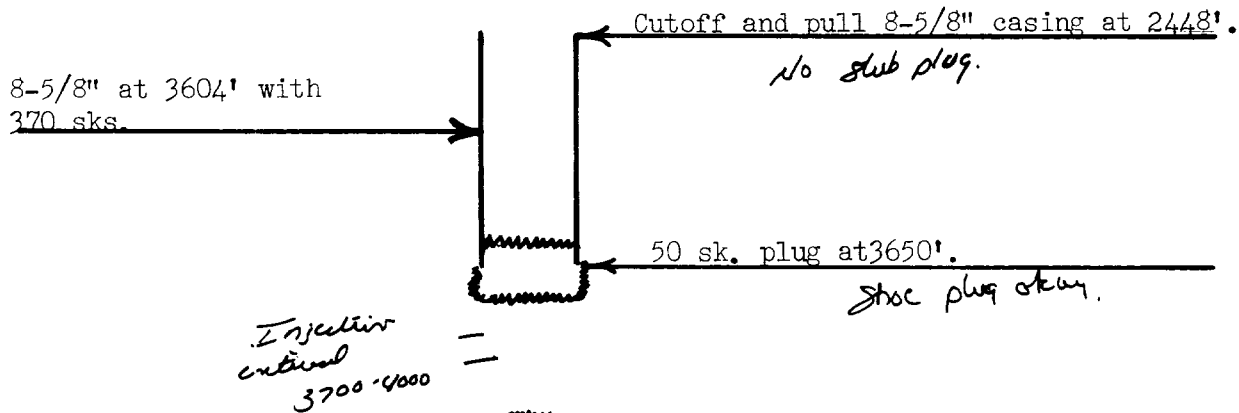
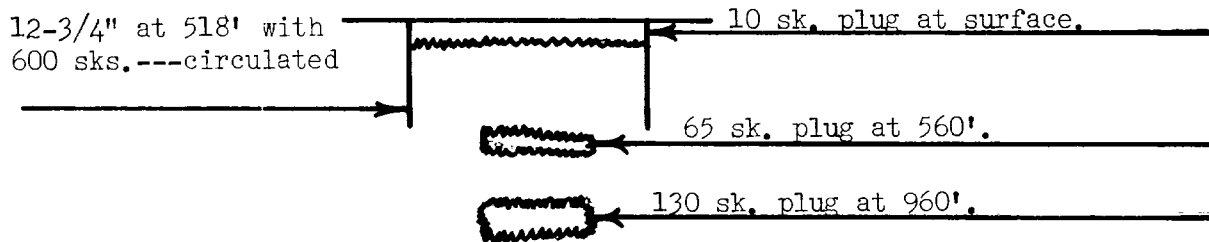
CIBP at 8100' with 50' of cement.

Open Hole at 8130'-8240'

Well is presently temporarily abandoned.



U.S. CROSBY #1
Greathouse and Lovelady Oil & Gas Co. Inc.
Unit N 660' FSL-1980' FWL
Section 28-T25S-R37E
Elevation: 3007' GL



Drilled in 1973. Originally a Crosby Devonian well.

CROSBY DEEP #1
Union Texas Petroleum Corporation
Unit N 330' FSL-1980' FWL
Section 28-T25S-R37E
Elevation: 3006' GL

1

13-3/8" at 502' with
500 sks.---
circulated

*1 1/8 cement behind
5 1/2" through register zone*

9-5/8" at 3806' with
2324 sks.---
circulated

5-1/2" at 10500' with
920 sks.---
FOC at 5710'

2-3/8" at 8671'

Perfs at 8734' - 8746'

Retainer at 8760'

Squeezed perfs at 8774' - 8788'

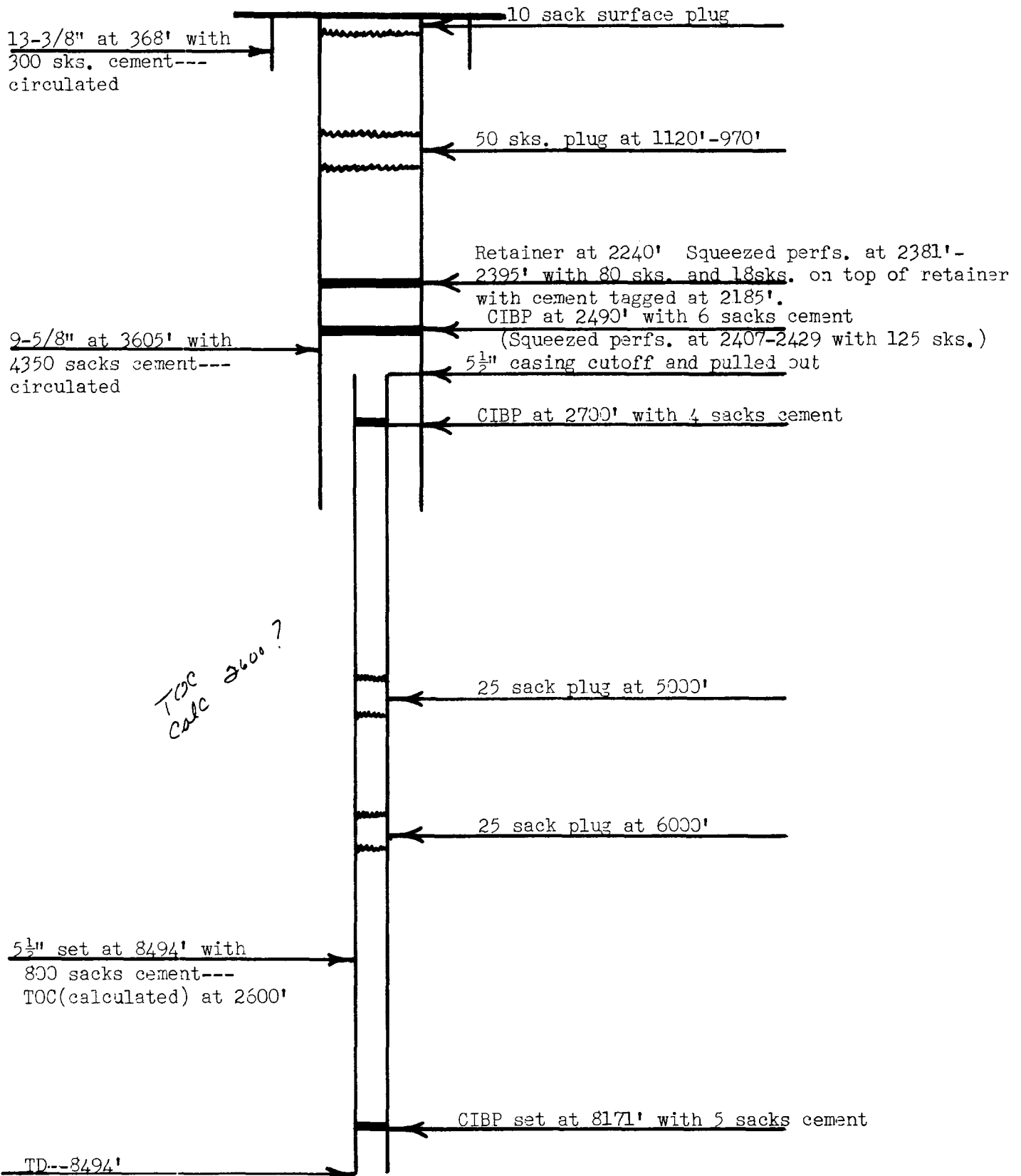
Retainer at 8850'

Squeezed perfs at 8863' - 8880'

TD - 10946'

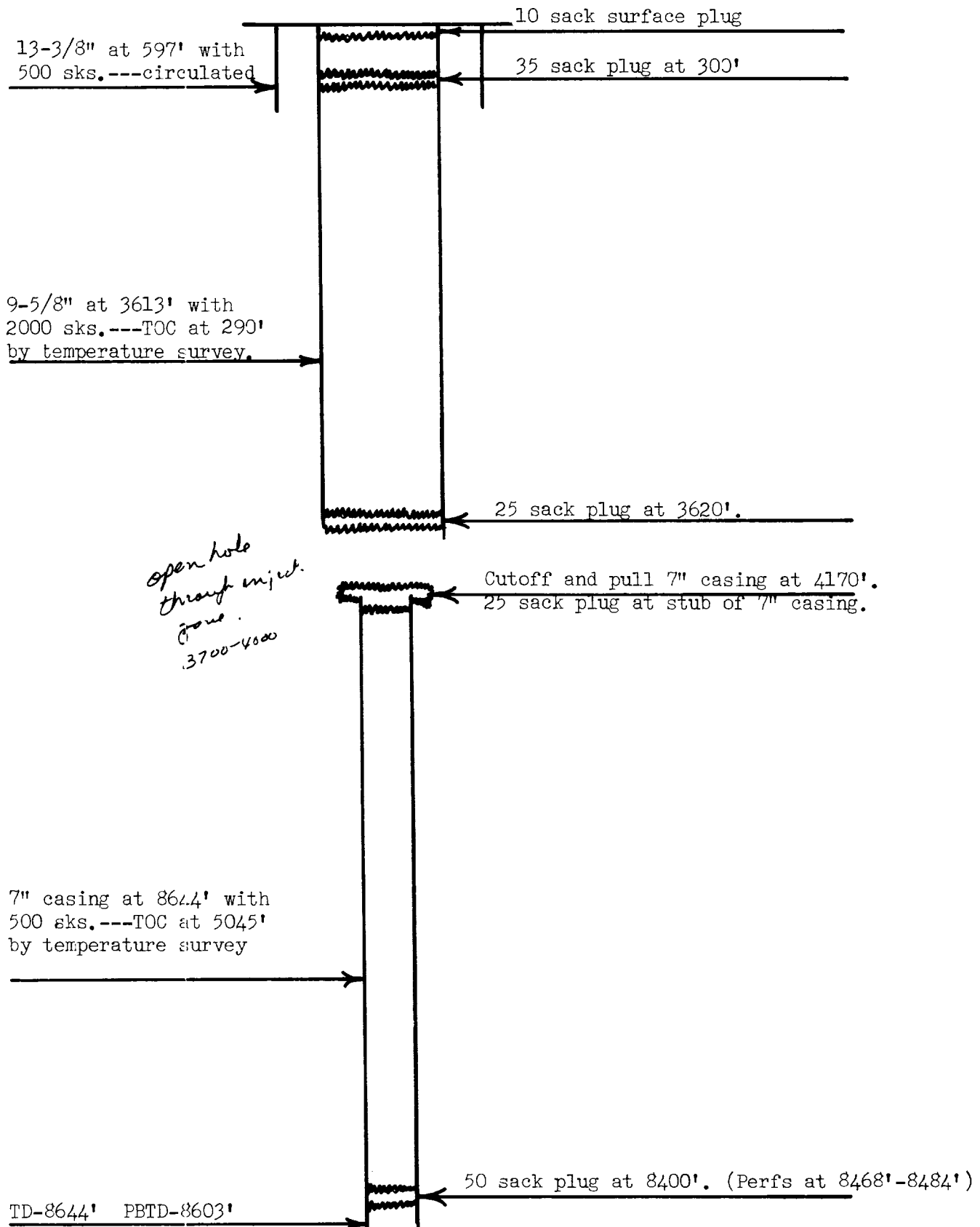
Well was originally drilled in 1971 to the Crosby Devonian formation

ARC FEDERAL #1
 Arco Oil and Gas Company
 Unit K 1980' FSL-1980' FWL
 Section 28-T25S-R37E



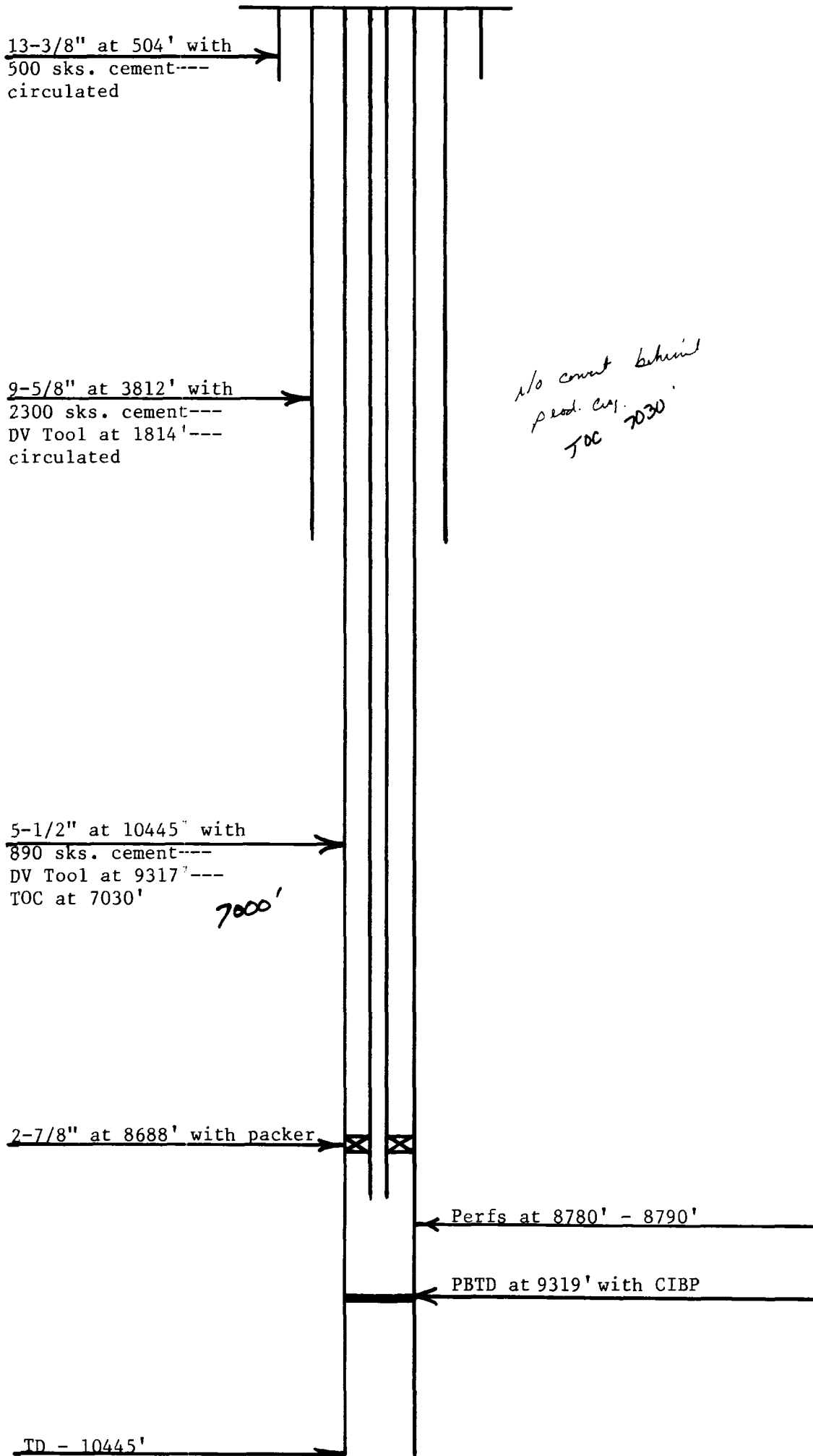
Well was originally drilled in 1954 to the Crosby Devonian formation.
 P and A 11-3-1977.

GUTMAN D #1
 Texas Pacific Oil Company
 Unit I 1830' FSL-660' FEL
 Section 29-T25S-R37E
 Elevation: 3011' GL



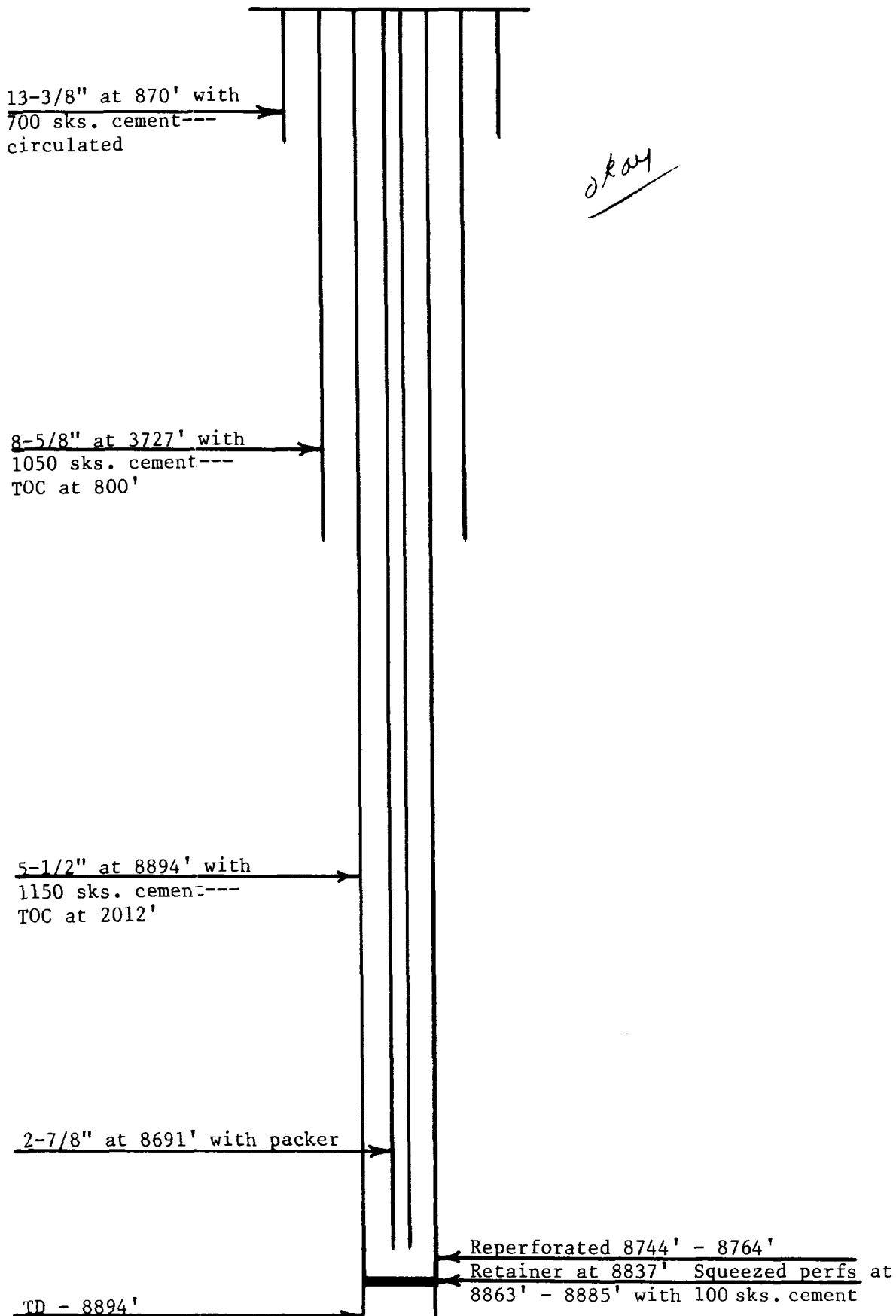
2

CROSBY DEEP #2
Union Texas Petroleum Corporation
Unit G 1650' FNL-2310' FEL
Section 33-T25S-R37E
Elevation: 2998' GL



Well was originally drilled in 1972 to the Crosby Fusselman formation.

CROSBY DEEP #4
Union Texas Petroleum Corporation
Unit C 785' FNL-1980' FWL
Section 33-T25S-R37E
Elevation: 3006.8' GL



Well was originally drilled in 1978 to the Crosby Fusselman formation.
PRTD at 8775'

3

G.W. SHAHAN #2
Gulf Oil Corporation
Unit B 990' FNL-1650' FEL
Section 33-T25S-R37E
Elevation: 3003' GL

13-3/8" at 506' with
700 sks cement----
circulated

8-5/8" at 3601' with
1375 sks. cement---
DV Tool at 1326'---
1st stage - 530 sks.
2nd stage - 845 sks.

*No indication of
TOC 5 1/2" cas.*

5-1/2" at 8248' with
500 sks. cement

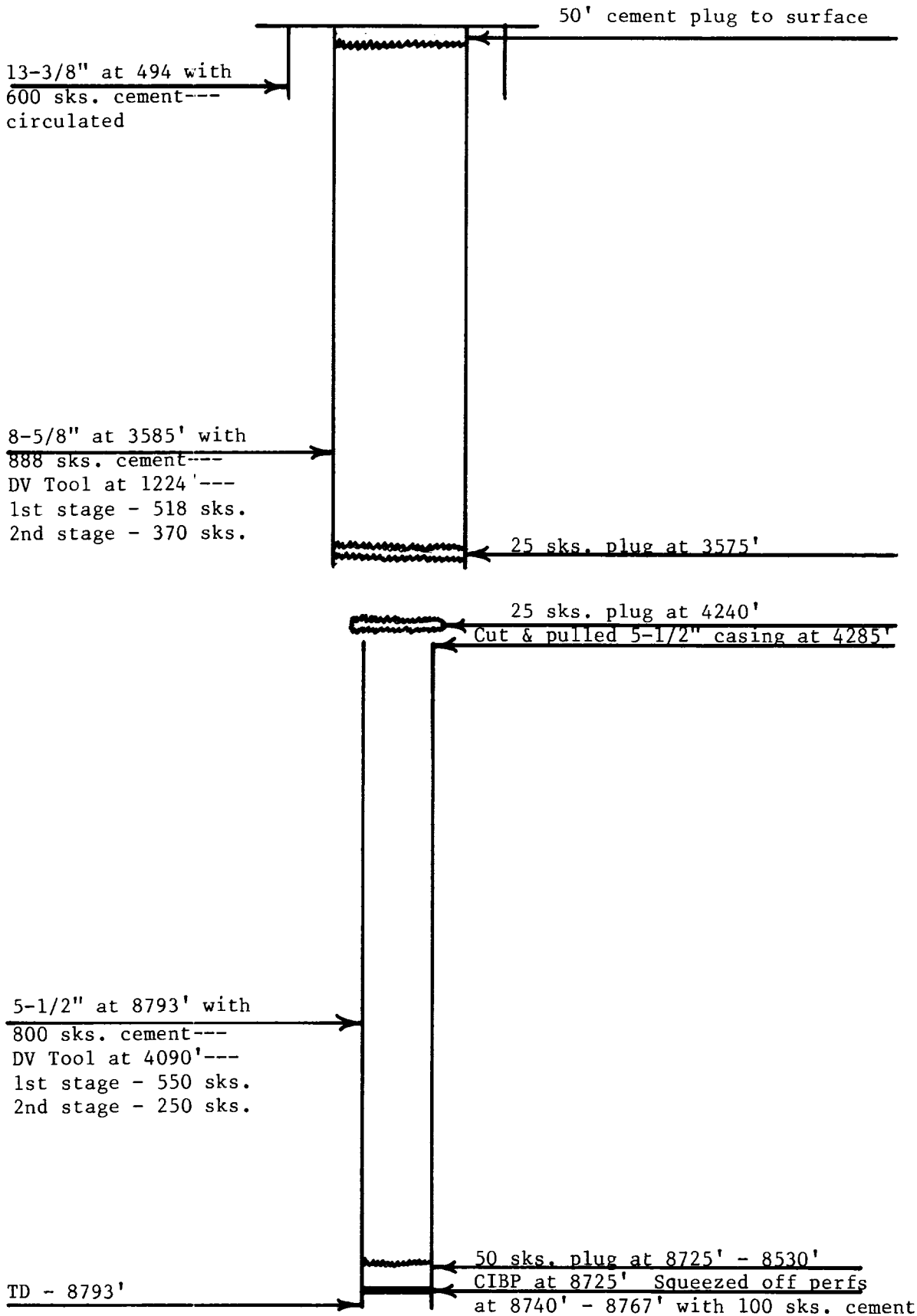
2-3/8" at 8237'

TD - 8250'

Perfs - 8126' - 8140'; 8160' - 8222';
8237' - 8246'

Well was originally drilled in 1956 to the Crosby Devonian formation.

ARNOTT RAMSEY B #3
 Gulf Oil Corporation
 Unit A 660' FNL-660' FEL
 Section 32-T25S-R37E



WATER ANALYSIS REPORT



NL Treating Chemicals/NL Industries, Inc.
P. O. Box 4305 Houston, Texas 77210

COMPANY Alpha-Twenty One				SHEET NUMBER	
DATE 5-11-84				STATE N.M.	
WELL(S) NAME OR NO. #1		COUNTY OR PARISH LEA		WATER SOURCE (FORMATION)	
USE OR UNIT 1 Paso Tom Fed	DEPTH, FT.	BHT, F	SAMPLE SOURCE wellhead	TEMP, F	WATER, BBL DAY
DATE SAMPLED 5-7-84		TYPE OF WATER <input checked="" type="checkbox"/> PRODUCED <input type="checkbox"/> SUPPLY <input type="checkbox"/> WATERFLOOD <input type="checkbox"/> SALT WATER DISPOSAL		OIL, BBL DAY	
				GAS, MMCF DAY	

WATER ANALYSIS PATTERN

(NUMBER BESIDE ION SYMBOL INDICATES me/l* SCALE UNIT)

Na ⁺ 20	15	10	5	0	5	10	15	20 Cl ⁻
Ca ⁺⁺								HCO ₃ ⁻
Mg ⁺⁺								SO ₄ ⁼
Fe ⁺⁺⁺								CO ₃ ⁼

SOLVED SOLIDS

IONS	me/l*	mg/l*
al Hardness	<u>120</u>	
ium, Ca ⁺⁺	<u>32</u>	<u>640</u>
nesium, Mg ⁺⁺	<u>88</u>	<u>1073.6</u>
(Total) Fe ⁺⁺⁺	<u>0.5</u>	<u>10.0</u>
ium, Ba ⁺⁺		
ium, Na (calc.)	<u>190.7</u>	<u>4386.1</u>
IONS		
ride, Cl	<u>26.7</u>	<u>9500</u>
ate, SO ₄	<u>29.7</u>	<u>1425</u>
bonate, CO		
arbonate, HCO ₃	<u>10.6</u>	<u>646.6</u>
roxyl, OH		
ide, S	<u>3.9</u>	<u>62.5</u>

DISSOLVED GASES

Hydrogen Sulfide, H ₂ S	mg/l*
Carbon Dioxide, CO ₂	mg/l*
Oxygen, O ₂	mg/l*

PHYSICAL PROPERTIES

pH	<u>5.5</u>
Eh (Redox Potential)	_____ MV
Specific Gravity	_____
Turbidity, JTU Units	_____
Total Dissolved Solids (calc.)	<u>17743</u> mg/l*
Stability Index @ _____ F	_____
@ _____ F	_____
CaSO ₄ Solubility @ _____ F	_____ mg/l*
@ _____ F	_____ mg/l*
Max. CaSO ₄ Possible (calc.)	_____ mg/l*
Max. BaSO ₄ Possible (calc.)	_____ mg/l*
Residual Hydrocarbons	_____ ppm(Vol/Vol)

PENDELD SOLIDS (QUALITATIVE)

Sulfide ☐ Iron Oxide ☐ Calcium Carbonate ☐ Acid Insoluble ☐

MARKS AND RECOMMENDATIONS:

*Extremely low scaling conditions.
relatively low iron count.*

*NOTE: me/l and mg/l are commonly used interchangeably for epm and ppm respectively. Where epm and ppm are used, corrections should be made for specific gravity.

ENGINEER Pandy Brown	DIST. NO. 821	ADDRESS	OFFICE PHONE	HOME PHONE
DATE 5/25/84	DISTRIBUTION	<input type="checkbox"/> CUSTOMER <input type="checkbox"/> AREA OR <input type="checkbox"/> DISTRICT OFFICE <input type="checkbox"/> BTC ENGINEER OR <input type="checkbox"/> BTC LAB <input type="checkbox"/> BTC SALES SUPERVISOR		

WL TREATING CHEMICALS
WL INDUSTRIES, INC.

SCALING TENDENCIES OF WATERS

COMPANY: ALPHA TWENTY-ONE
SAMPLE POINT: WELL #1
LOCATION: EL PASO TOM FED
DATE: 5/7/84

WATER ANALYSIS (MG/L):

SODIUM: 4386.1
CALCIUM: 640.0
MAGNESIUM: 1073.6
CHLORIDE: 9500.0
SULFATE: 1425.0
BICARBONATE: 646.6
IRON: 10.0
MANGANESE: 0.

PH: 5.5

IONIC STRENGTH = 0.3854

INDEX VALUES GREATER THAN ZERO INDICATE SCALING CONDITIONS
INDEX VALUES OF ZERO OR LESS INDICATE A STABLE WATER

TEMP.	CALCITE INDEX	GYPHUM INDEX	ANHYDRITE INDEX	BARITE INDEX
60	-1.45	-0.55	-0.81	-41.53
80	-1.35	-0.58	-0.73	-41.66
100	-1.22	-0.59	-0.65	-41.78
120	-1.06	-0.59	-0.56	-41.89
140	-0.88	-0.58	-0.47	-41.99
160	-0.67	-0.57	-0.37	-42.07
180	-0.43	-0.55	-0.26	-42.14
200	-0.16	-0.53	-0.14	-42.20
220	0.15	-0.51	-0.01	-42.23
240	0.49	-0.48	0.13	-42.22
260	0.86	-0.46	0.28	-42.16

WATER ANALYSIS REPORT

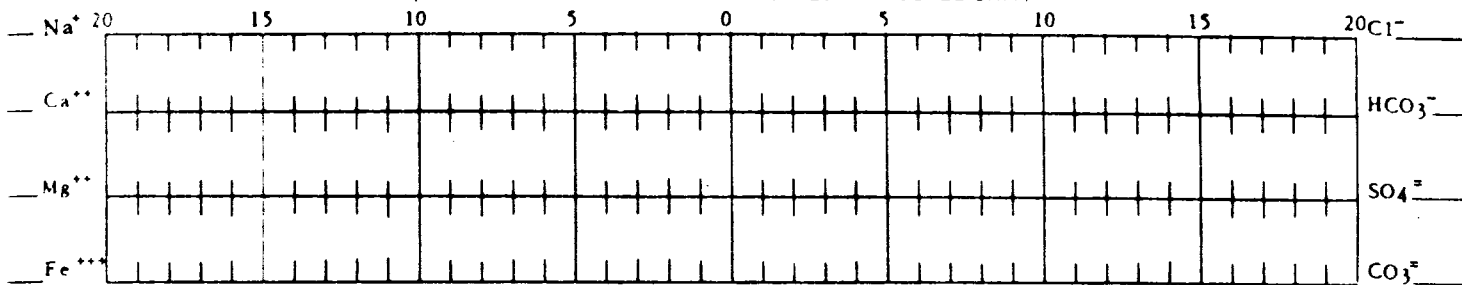


NL Treating Chemicals/NL Industries, Inc.
P. O. Box 4305 Houston, Texas 77210

COMPANY Alpha-Twenty One				SHEET NUMBER	
LD				DATE 5-11-84	
COUNTY OR PARISH LEA				STATE N.M.	
WELL(S) NAME OR NO. #2		WATER SOURCE (FORMATION)			
WELL(S) TYPE OR UNIT 1 Paso Tom Fed.		WATER SOURCE (FORMATION)			
PTH. FT.	BHT. F	SAMPLE SOURCE Wellhead	TEMP. F	WATER, BBL/DAY	OIL, BBL/DAY
DATE SAMPLED 5-7-84		TYPE OF WATER <input checked="" type="checkbox"/> PRODUCED <input type="checkbox"/> SUPPLY <input type="checkbox"/> WATERFLOOD <input type="checkbox"/> SALT WATER DISPOSAL			

WATER ANALYSIS PATTERN

(NUMBER BESIDE ION SYMBOL INDICATES me/l* SCALE UNIT)



SOLVED SOLIDS

ATIONS
al Hardness
cium, Ca⁺⁺
gnesium, Mg⁺⁺
r (Total) Fe⁺⁺⁺
ium, Ba⁺⁺
ium, Na (calc.)

me/l*	mg/l*
<u>6.8</u>	<u>320</u>
<u>16</u>	<u>634.4</u>
<u>5.2</u>	<u>3.75</u>
<u>0.2</u>	<u>3.75</u>
<u>172.0</u>	<u>3956.0</u>

DISSOLVED GASES

Hydrogen Sulfide, H₂S _____ mg/l*
Carbon Dioxide, CO₂ _____ mg/l*
Oxygen, O₂ _____ mg/l*

PHYSICAL PROPERTIES

pH 5.5
Eh (Redox Potential) _____ MV
Specific Gravity _____
Turbidity, JTU Units _____
Total Dissolved Solids (calc.) 13679 mg/l*
Stability Index @ _____ F
@ _____ F
CoSO₄ Solubility @ _____ F
@ _____ F
Max. CaSO₄ Possible (calc.) _____ mg/l*
Max. BaSO₄ Possible (calc.) _____ mg/l*
Residual Hydrocarbons _____ ppm(Vol/Vol)

IONS
oride, Cl
fate, SO₄
bonate, CO₃
arbonate, HCO₃
troxyl, OH
fide, S⁻

me/l*	mg/l*
<u>219.7</u>	<u>7800</u>
<u>13.0</u>	<u>625</u>
<u>4.9</u>	<u>298.9</u>
<u>2.6</u>	<u>41.7</u>

SPENDED SOLIDS (QUALITATIVE)

Sulfide ☐ Iron Oxide ☐ Calcium Carbonate ☐ Acid Insoluble ☐

MARKS AND RECOMMENDATIONS:

Extremely low scaling conditions.
Low iron count.

* NOTE: me/l and mg/l are commonly used interchangeably for epm and ppm respectively. Where epm and ppm are used, corrections should be made for specific gravity.

ENGINEER Andy Brown	DIST. NO. 821	ADDRESS	OFFICE PHONE	HOME PHONE
ANALYZED Crum	DATE 5/25/84	DISTRIBUTION <input type="checkbox"/> CUSTOMER <input type="checkbox"/> BTC ENGINEER OR	<input type="checkbox"/> AREA OR <input type="checkbox"/> BTC LAB	<input type="checkbox"/> DISTRICT OFFICE <input type="checkbox"/> BTC SALES SUPERVISOR

WATER TREATING CHEMICALS
WAL INDUSTRIES, INC.

SCALING TENDENCIES OF WATERS

COMPANY: ALPHA TWENTY-ONE
SAMPLE POINT: WELL #2
LOCATION: EL PASO TOM PED
DATE: 5/7/84

WATER ANALYSIS (MG/L):

SODIUM: 3956.0
CALCIUM: 320.0
MAGNESIUM: 634.4
CHLORIDE: 2800.0
SULFATE: 625.0
BICARBONATE: 298.9
IRON: 3.8
MANGANESE: 0.

PH: 5.5

IONIC STRENGTH = 0.2800

INDEX VALUES GREATER THAN ZERO INDICATE SCALING CONDITIONS
INDEX VALUES OF ZERO OR LESS INDICATE A STABLE WATER

TEMP.	CALCITE INDEX	GYPHUM INDEX	ANHYDRITE INDEX	BARITE INDEX
60	-1.97	-1.08	-1.33	-41.42
80	-1.86	-1.11	-1.26	-41.55
100	-1.74	-1.13	-1.18	-41.67
120	-1.59	-1.13	-1.10	-41.78
140	-1.42	-1.12	-1.00	-41.87
160	-1.22	-1.10	-0.90	-41.95
180	-0.99	-1.08	-0.79	-42.01
200	-0.74	-1.06	-0.66	-42.06
220	-0.46	-1.03	-0.53	-42.08
240	-0.15	-1.00	-0.39	-42.07
260	0.20	-0.96	-0.23	-42.00

WATER ANALYSIS REPORT



NL Treating Chemicals/NL Industries, Inc.

P. O. Box 4305 Houston, Texas 77210

COMPANY ALPHA - TWENTY ONE							SHEET NUMBER
COUNTY OR PARISH LEA							DATE 5-11-84
STATE N.M.							
WELL(S) NAME OR NO. 1 Paso Tom Federal #3			WATER SOURCE (FORMATION)				
TH. FT.	BHT, F	SAMPLE SOURCE wellhead	TEMP, F	WATER, BBL/DAY	OIL, BBL/DAY	GAS, MMCF/DAY	
DATE SAMPLED 5-7-84		TYPE OF WATER <input type="checkbox"/> PRODUCED <input type="checkbox"/> SUPPLY <input type="checkbox"/> WATERFLOOD <input type="checkbox"/> SALT WATER DISPOSAL					

WATER ANALYSIS PATTERN

(NUMBER BESIDE ION SYMBOL INDICATES me/l* SCALE UNIT)

Na ⁺ 20	15	10	5	0	5	10	15	20 Cl ⁻
Ca ⁺⁺								HCO ₃ ⁻
Mg ⁺⁺								SO ₄ ⁼⁼
Fe ⁺⁺⁺								CO ₃ ⁼⁼

SOLVED SOLIDS

IONS
al Hardness
cium, Ca⁺⁺
nesium, Mg⁺⁺
(Total) Fe⁺⁺⁺
ium, Ba⁺⁺
ium, Na (calc.)

me/l*	mg/l*
<u>44</u>	<u>240</u>
<u>12</u>	<u>390.4</u>
<u>32</u>	<u>13.25</u>
<u>0.7</u>	
<u>37</u>	<u>851.0</u>

DISSOLVED GASES

Hydrogen Sulfide, H₂S _____ mg/l*
Carbon Dioxide, CO₂ _____ mg/l*
Oxygen, O₂ _____ mg/l*

IONS
oride, Cl⁻
ate, SO₄⁼⁼
bonate, CO₃⁼⁼
arbonate, HCO₃⁻
roxyl, OH⁻
ide, S⁻

me/l*	mg/l*
<u>70.4</u>	<u>2500</u>
<u>5.5</u>	<u>263.5</u>
<u>3.7</u>	<u>225.7</u>
<u>2.1</u>	<u>33.3</u>

PHYSICAL PROPERTIES

pH 6.0
Eh (Redox Potential) _____ MV
Specific Gravity _____
Turbidity, JTU Units _____
Total Dissolved Solids (calc.) 366.5 mg/l*
Stability Index @ _____ F _____
@ _____ F _____
CaSO₄ Solubility @ _____ F _____ mg/l*
@ _____ F _____ mg/l*
Max. CaSO₄ Possible (calc.) _____ mg/l*
Max. BaSO₄ Possible (calc.) _____ mg/l*
Residual Hydrocarbons _____ ppm(Vol/Vol)

SOLVED SOLIDS (QUALITATIVE)

Sulfide ☐ Iron Oxide ☐ Calcium Carbonate ☐ Acid Insoluble ☐

MARKS AND RECOMMENDATIONS:

no scaling possibilities
in count getting high.

* NOTE: me/l and mg/l are commonly used interchangeably for epm and ppm respectively. Where epm and ppm are used, corrections should be made for specific gravity.

ENGINEER Andy Brown	DIST. NO. 821	ADDRESS	OFFICE PHONE	HOME PHONE
ANALYZED Crum	DATE 5/25/84	DISTRIBUTION <input type="checkbox"/> CUSTOMER <input type="checkbox"/> AREA OR <input type="checkbox"/> DISTRICT OFFICE <input type="checkbox"/> BTC ENGINEER OR <input type="checkbox"/> BTC LAB <input type="checkbox"/> BTC SALES SUPERVISOR		

ML TREATING CHEMICALS
ML INDUSTRIES, INC.

SCALING TENDENCIES OF WATERS

COMPARIS: ALPHA TWENTY-ONE
SAMPLE POINT: WELL #3
LOCATION: EL PASO TOWNSHIP
DATE: 5/7/84

WATER ANALYSIS (MG/L):

SODIUM: 851.0
CALCIUM: 240.0
MAGNESIUM: 390.4
CHLORIDE: 2500.0
SULFATE: 262.5
BICARBONATE: 225.7
IRON: 13.3
MANGANESE: 0.

PH: 6.0

IONIC STRENGTH = 0.1062

INDEX VALUES GREATER THAN ZERO INDICATE SCALING CONDITIONS
INDEX VALUES OF ZERO OR LESS INDICATE A STABLE WATER

TEMP.	HALITE INDEX	GYPHUM INDEX	ANHYDRITE INDEX	BARITE INDEX
60	-1.41	-1.25	-1.50	-41.08
80	-1.29	-1.29	-1.44	-41.22
100	-1.17	-1.31	-1.36	-41.34
120	-1.04	-1.31	-1.28	-41.44
140	-0.89	-1.31	-1.18	-41.52
160	-0.73	-1.29	-1.08	-41.58
180	-0.54	-1.26	-0.96	-41.62
200	-0.35	-1.23	-0.84	-41.65
220	-0.13	-1.20	-0.70	-41.65
240	0.11	-1.17	-0.55	-41.63
260	0.37	-1.13	-0.40	-41.57

UNICHEM INTERNATIONAL

601 NORTH LEECH

P.O. BOX 1499

HOBBS, NEW MEXICO 88240

COMPANY : ALPHA TWENTY-ONE
 DATE : 3-14-83
 FIELD LEASE & WELL : EL PASO TOM FEDERAL #4
 WELL POINT : WELLHEAD
 DATE SAMPLED : 3-9-83

SPECIFIC GRAVITY = 1.024
 TOTAL DISSOLVED SOLIDS = 38525
 = 6.98

		ME/L	MG/L
CATIONS			
SODIUM	(CA)+2	25.3	507.
MAGNESIUM	(MG)+2	196.	2390.
CALCIUM	(NA), CALC.	407.	9378.
ANIONS			
CARBONATE	(HCO3)-1	32.8	2001.
BICARBONATE	(CO3)-2	0	0
HYDROXIDE	(OH)-1	0	0
SULFATE	(SO4)-2	244.	11750
CHLORIDE	(CL)-1	352.	12497.
DISSOLVED GASES			
CARBON DIOXIDE	(CO2)	NOT RUN	
HYDROGEN SULFIDE	(H2S)	NOT RUN	
OXYGEN	(O2)	NOT RUN	
IRON (TOTAL)	(FE)		.7
COPPER	(BA)+2	NOT RUN	
MANGANESE	(MN)	NOT RUN	

SCALING INDEX

TEMP

CARBONATE INDEX
 SODIUM CARBONATE SCALING
 SULFATE INDEX
 SODIUM SULFATE SCALING

30C
 86F
 351
 LIKELY
 -1.0
 UNLIKELY

ILLEGIBLE



ALPHA TWENTY-ONE PRODUCTION COMPANY

POST OFFICE BOX 1206
JAL. NEW MEXICO 88252

505/395-3056

December 7, 1984

Arco Oil & Gas Company
P.O. Box 1710
Hobbs, NM 88240

RE: Gregory "A" Federal No. 3
660' FNL & 660' FWL,
Sec. 33, T-25-S, R-37-E,
Lea County, New Mexico

Gentlemen:

As offset operator or surface owner please find enclosed, as required, a copy of Application to Dispose Produced Water into a Formation Non-Productive of Oil and Gas. We plan to dispose produced water from our El Paso Tom Federal lease into the San Andres formation through the above proposed salt water disposal well which is adjacent to our El Paso Tom Federal lease.

If you desire further information, please contact the New Mexico Oil Conservation Division, P.O. Box 2088, Santa Fe, NM 87501.

Respectfully,

Michael D. Oney,
Drilling Superintendent

MDO/tic
Enclosure

cc: Mrs. Nadine Owen, 909 W. Taos, Hobbs, NM 88240
Lewis B. Burleson, P.O. Box 2479, Midland, TX 79702
El Paso Natural Gas Company, 1800 Wilco Building, Midland, TX 79701
Greathouse & Lovelady Oil & Gas, Inc., P.O. Drawer 2666, Midland, TX 79701
Gulf Oil Corporation, P.O. Box 670, Hobbs, NM 88240
Doyle Hartman, P.O. Box 10426, Midland, TX 79702
Sun Exploration & Production Company, P.O. Box 1861, Midland, TX 79702
Union Texas Petroleum Corporation, 1300 Wilco Building, Midland, TX 79701

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

December 9, 19 84

and ending with the issue dated

December 9, 19 84

Robert L. Summers

Publisher.

Sworn and subscribed to before

me this 11 day of

December, 19 84

Jane Paulowsky

Notary Public.

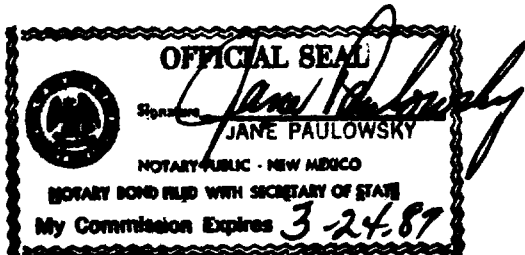
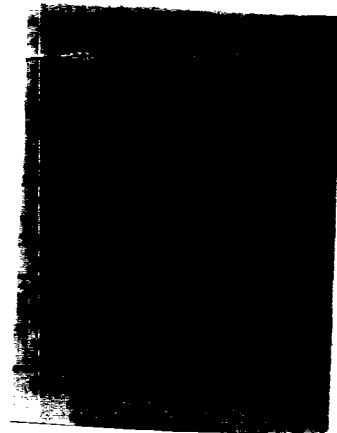
My Commission expires _____

3-24, 19 87

(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.

Did not state in ad whether zone, rate, or postage



DEC 12 1984

100

100

100

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 Sun Exploration & Production Co.
 P.O. Box 1861
 Midland, TX 79702

4. Type of Service: Article Number
☐ Registered ☐ Insured
☐ Certified ☐ COD P 713 192 115
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery
 DEC 13 1984

8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 Mrs. Nadine Owen
 909 W. Taos
 Hobbs, NM 88240

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 104
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery
 DEC 13 1984

8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 El Paso Natural Gas Company
 1800 Wilco Building
 Midland, TX 79701

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 111
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery
 DEC 13 1984

8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 Gulf Oil Corporation
 P.O. Box 670
 Hobbs, NM 88240

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 113
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery
 DEC 13 1984

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, July 1983

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:

Arco Oil & Gas Company
 P.O. Box 1710
 Hobbs, NM 88240

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 109

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X *K. Crowell*

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

bc



RETURN RECEIPT

PS Form 3811, July 1983

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:

Union Texas Petroleum Corporation
 1300 Wilco Building
 Midland, TX 79701

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 116

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X *J. Deane*

6. Signature - Agent

X *A. L. L.*

7. Date of Delivery

12-14-84

8. Addressee's Address (ONLY if requested and fee paid)

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:

Doyle Hartman
 P.O. Box 10426
 Midland, TX 79702

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 114

Always obtain signature of addressee or agent and
DATE DELIVERED.

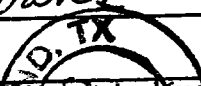
5. Signature - Addressee

X

6. Signature - Agent

X *Denise Evans*

7. Date of Delivery



DOMESTIC RETU

PS Form 3811, July 1983 447-945

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:

Shirley B. Burkman Jr.

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 114

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X *J. B. Burkman Jr.*

6. Signature - Agent

X

7. Date of Delivery

12-13-84

DOMESTIC RE

PS Form 3811, July 1983 447-845

● **SENDER: Complete items 1, 2, 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 card 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.

2. ☐ Restricted Delivery.

3. Article Addressed to:

2666
79701

4. Type of Service:

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number: 713192112

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
X

6. Signature - Agent
X *Dany Sh...*

7. Date of Delivery
12-15-84

8. Addressee's Address (ONLY if requested and fee paid)

DOMESTIC RETURN RECEIPT



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE
December 28, 1984

TONEY ANAYA
GOVERNOR

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	X _____
WFX	_____
PMX	_____

Gentlemen:

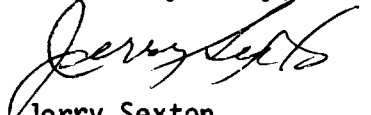
I have examined the application for the:

Alpha Twenty-One Prod. Co.	Sun Gregory A	No. 3-D	33-25-37
Operator	Lease & Well No.	Unit	S-T-R

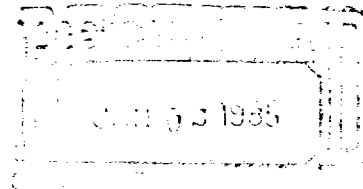
and my recommendations are as follows:

O.K.--J.S.

Yours very truly,


Jerry Sexton
Supervisor, District 1

/mc





ALPHA TWENTY-ONE PRODUCTION COMPANY

Box 1206
Santa Fe, NM 87501

505/395 3056

December 7, 1984

Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87501

DEC 26 1984
RECEIVED

RE: Gregory "A" Federal No. 3
660' FNL & 660' FWL,
Sec. 33, T-25-S, R-37-E,
Lea County, New Mexico

Gentlemen:

Enclosed for your review and approval find our Application for Authorization to Dispose Produced Water into a Zone Non-Productive of Oil and Gas for the above captioned well.

The proposed salt water disposal well is currently temporarily abandoned. Records show that the well was originally drilled to 4000', but plugged back to 3240' with 275 sacks of cement. The well was then produced in the Queen formation through open-hole from 3085' to 3240' as an oil well in the Langlie Mattix pool.

Alpha Twenty-One Production Company proposed to re-enter the well and drill out the cement to the original TD of 4000'. We would then log, set a liner from 2900' to 4000', cement, perforate, and acidize with 1000 gallons. Attached please find an injection well data sheet showing the well after re-entry operations are complete and ready for disposal.

The produced water for disposal will come from our El Paso Tom Federal lease, Sec. 33, T-25-S, R-37-E, Lea County, New Mexico. The average rate should be 23 BW/hour with a maximum rate of 549 BWPD. We can expect the average volume to be 300 BWPD with a maximum volume of 500 BWPD. The system will be closed using a production packer. The average injection rate anticipated will be 800 psi with a maximum rate of 1200 psi. The non-productive zone for disposal will be the San Andres, but since there are no producing San Andres well within a two-mile radius, chemical analysis could not be obtained for the San Andres formation, however chemical analysis for the produced water to be disposed is attached.

December 7, 1984

Geological information indicates that the San Andres formation is a dolomite approximately 1300 feet thick at a depth of 3700'. Information also indicates that the fresh water in the area is sparsly located and not plentiful and is usually found in the Red Bed formation. After checking with the New Mexico State Engineer's office and upon a visual inspection, the only fresh water well found within a one-mile radius is owned by Clyde Cooper. This water well is located in the NE, NE, SW, NE of Section 33 and is currently nonproducing, henceforth, no chemical analysis of the fresh water could be obtained.

After a thorough search of the records at the New Mexico Oil Conservation District office in Hobbs, no record of logs for the captioned well could be found on file, but, as stated before, the well will be logged prior to perforating and a copy of the logs will be made available for public record.

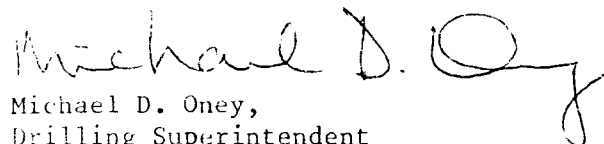
All available geological and engineering data has been examined and no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water has been found.

Attached for your review and records, please find the following:

- 1.) A map that identifies all wells and leases within two miles of the proposed injection well. A one-half mile radius circle has been drawn around the proposed injection well (the area of review).
- 2.) A tabulation of data on all wells of public record within the area of review which penetrate the disposal zone.
- 3.) Chemical analysis of produced water to be disposed.
- 4.) A data sheet and schematic of the proposed disposal well.
- 5.) A copy of the legal advertisement publication.
- 6.) Copies of the return receipts on certified mailings offered as proof of notification to offset operators and surface owner.

If any further information is required for the administrative approval of this Application For Authorization to Dispose Produced Water, please contact me. Thank you for your consideration and cooperation in this matter.

Respectfully yours,


Michael D. Oney,
Drilling Superintendent

MDO/tic
Enclosures

December 7, 1984

cc: Oil Conservation Division
P.O. Box 1980
Hobbs, NM 88240

Bureau of Land Management
Carlsbad Resource Area
P.O. Box 1778
Carlsbad, NM 88240

Alpha Twenty-One Production Co.
200 W. Illinois Street, Suite 200
Midland, TX 79701
ATTN: Mr. Tom Phipps

Surface Owner:

Mrs. Nadine Owen
909 W. Taos
Hobbs, NM 88240

Offset Operators:

Arco Oil & Gas Company
P.O. Box 1710
Hobbs, NM 88240

Lewis B. Burleson, Inc.
P.O. Box 2479
Midland, TX 79702

El Paso Natural Gas Co.
1800 Wilco Building
Midland, TX 79701

Greathouse & Lovelady Oil & Gas, Inc.
P.O. Drawer 2666
Midland, TX 79701

Gulf Oil Corporation
P.O. Box 670
Hobbs, NM 88240

Doyle Hartman
P.O. Box 10426
Midland, TX 79702

Sun Exploration & Prod. Co.
P.O. Box 1861
Midland, TX 79702

Union Texas Petroleum Corp.
1300 Wilco Building
Midland, TX 79701

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage
Application qualifies for administrative approval? ☒ yes ☐ no
- II. Operator: ALPHA TWENTY-ONE PRODUCTION COMPANY
Address: P.O. Box 1206 Jal, New Mexico 88252
Contact party: Michael D. Onay Phone: 505-395-3056
- III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? ☐ yes ☒ no
If yes, give the Division order number authorizing the project _____.
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- * VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate 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.
- IX. Describe the proposed stimulation program, if any.
- * X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)
- * XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground 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: Michael D. Onay Title Drilling Superintendent
Signature: Michael D. Onay Date: 12-10-84
- * 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. _____

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.

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Application qualifies for administrative approval? ☒ yes ☐ no
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 2. Whether the system is open or closed;
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 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.
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Signature: Michael D. Oney Date: 12-10-84
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DISTRIBUTION: Original and one copy to Santa Fe with one copy to the appropriate Division district office.

The map is a detailed representation of the oil industry in the Gulf of Mexico region. It is divided into a grid of sections, each labeled with a name and a number. The names include 'ALMAT', 'STUART', 'LANGLIE', 'MATTIX', 'UNIT MOBIL', 'RESERVE OIL', 'BENNETT', 'SCARBOROUGH', 'RHODES', and 'FARNSWORTH'. The map also shows various oil companies, such as 'ARCO', 'Mobil', 'Texaco', 'El Paso', and 'Union'. The map is a complex representation of the oil industry in the Gulf region, with many small details and labels.

INJECTION WELL DATA SHEET

ALPHA TWENTY-ONE PRODUCTION COMPANY
OPERATORGREGORY 'A' FEDERAL
LEASE3 660' FNL-660'FWL
WELL NO. FOOTAGE LOCATION33
SECTIONT25 South
TOWNSHIP37 East
RANGE

Lea County, New Mexico

Schematic

Tabular Data

Surface Casing

Size 9-5/8 " Cemented with 300 sx.TOC Surface feet determined by CirculatedHole size 12-1/4"

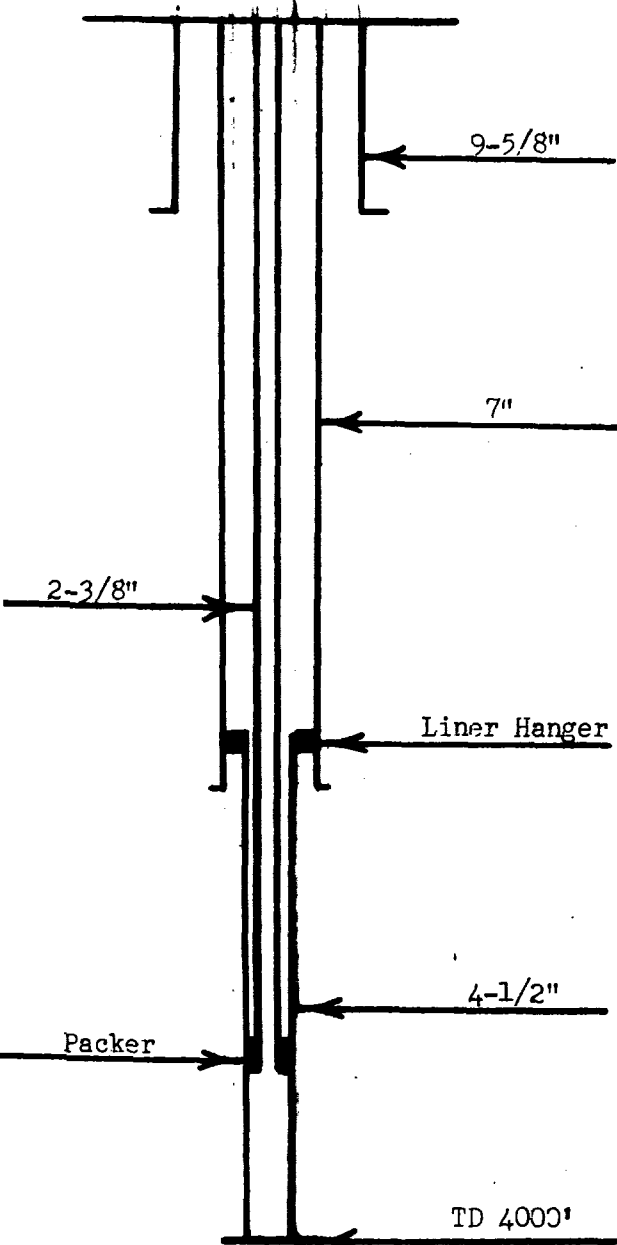
Intermediate Casing

Size 7 " Cemented with 150 sx.TOC 1839 feet determined by CalculatedHole size 8-3/4"

Long string--Liner

Size 4-1/2 " Cemented with 79 sx.TOC 2900 feet determined by CalculationHole size 6-1/8"Total depth 4000'

Injection interval

3700 feet to 4000 feet
perforated or open-hole, indicate which)Tubing size 2-3/8" lined with plastic set in a
(material)Knickel plated Baker AD-1 packer at 3600 feet
(brand and model)

(or describe any other casing-tubing seal).

Other Data

1. Name of the injection formation San Andres

2. Name of Field or Pool (if applicable) _____

3. Is this a new well drilled for injection? ☐ Yes ☒ NoIf no, for what purpose was the well originally drilled? Gas well

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) _____

Open Hole 3085'-3240'5. Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. Jalmat(Yates/Seven Rivers) 2450' Langlie-Mattix(Seven Rivers/Queen)
2900' Crosby(Devonian) 8150'

GREGORY FEDERAL #4 SWD.
Union Texas Petroleum Corp.
Unit 1980' FSI-1980' FWL
Section 33-T25S-R37E
Elevation: 3008' DF

13-3/8" at 539' ---
cement circulated

9-5/8" at 3886' ---
cement circulated

2-3/8" at 3900' with
Baker AD-1 packer

Perforations at 3990'-4682'

156' plug at 4860'-4910'

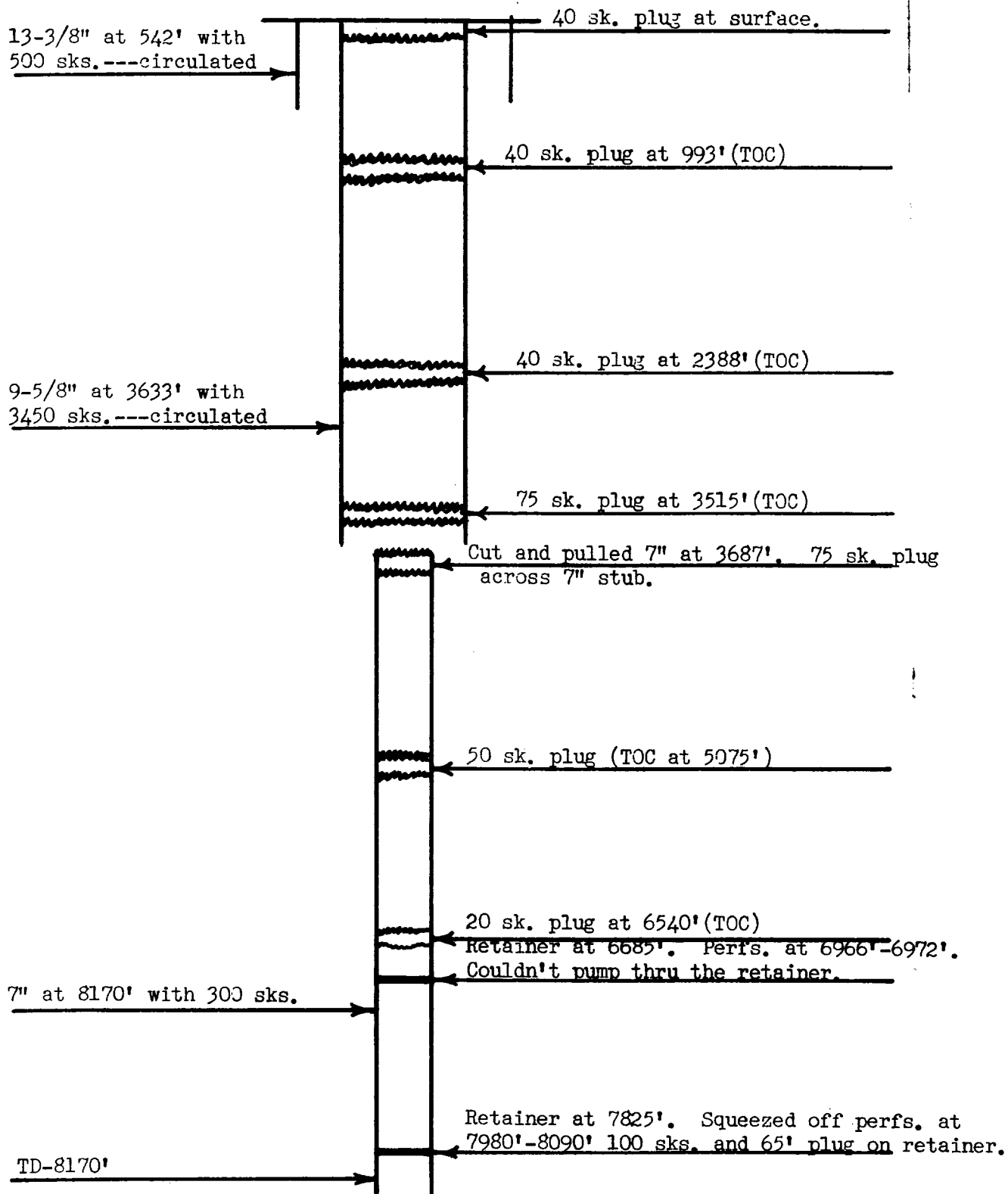
5 1/2" at 8460' ---
cement circulated

CIBP at 8275' with 35' cement

TD-8461' PBTD-4860'

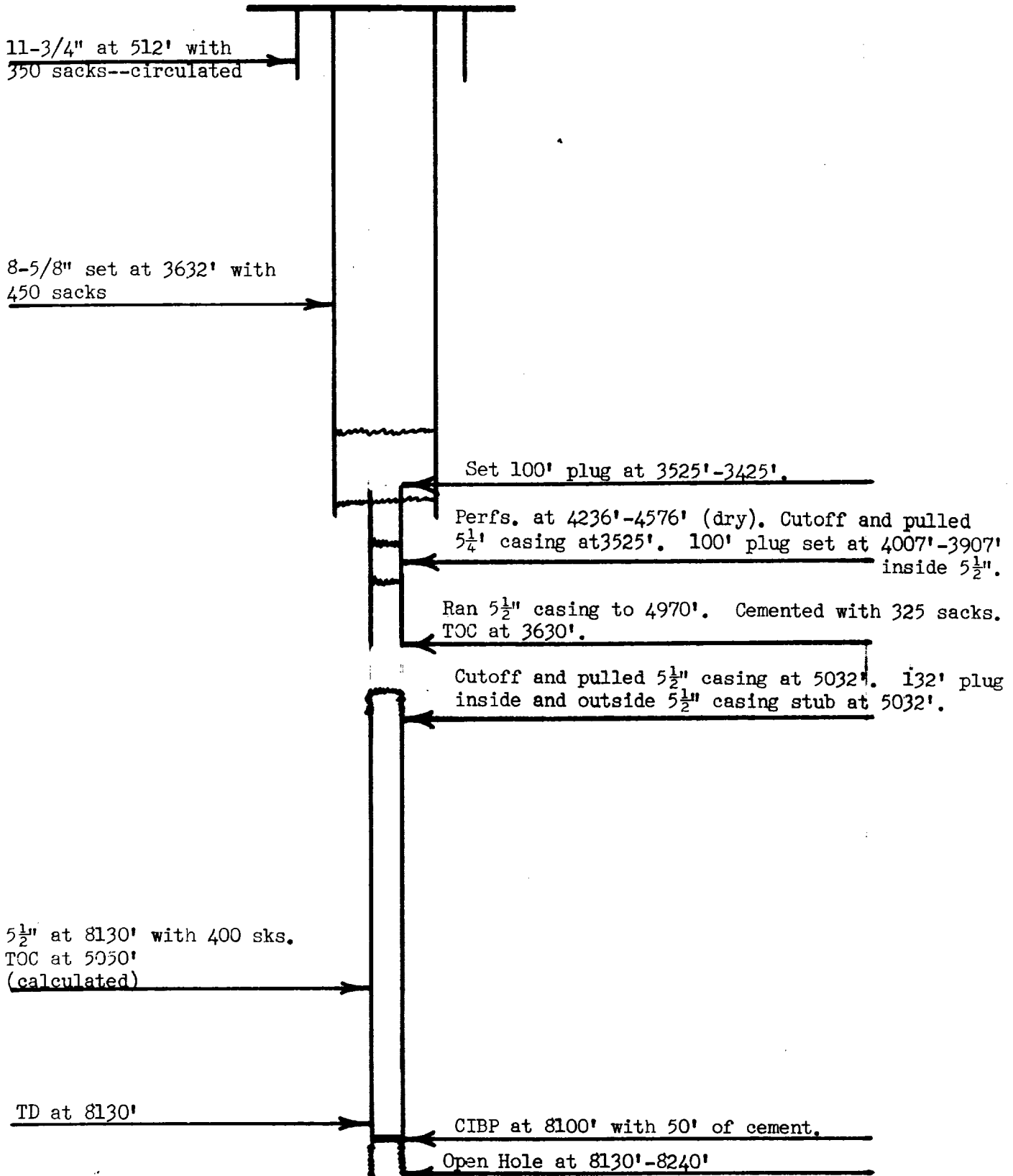
Drilled in 1957. Disposing into the San Andres formation.

GREGORY FEDERAL #2-Y
 El Paso Natural Gas Co.
 Unit L 760' FNL-1650' FWL
 Section 33-T25S-R37E
 Elevation: 3002' GL



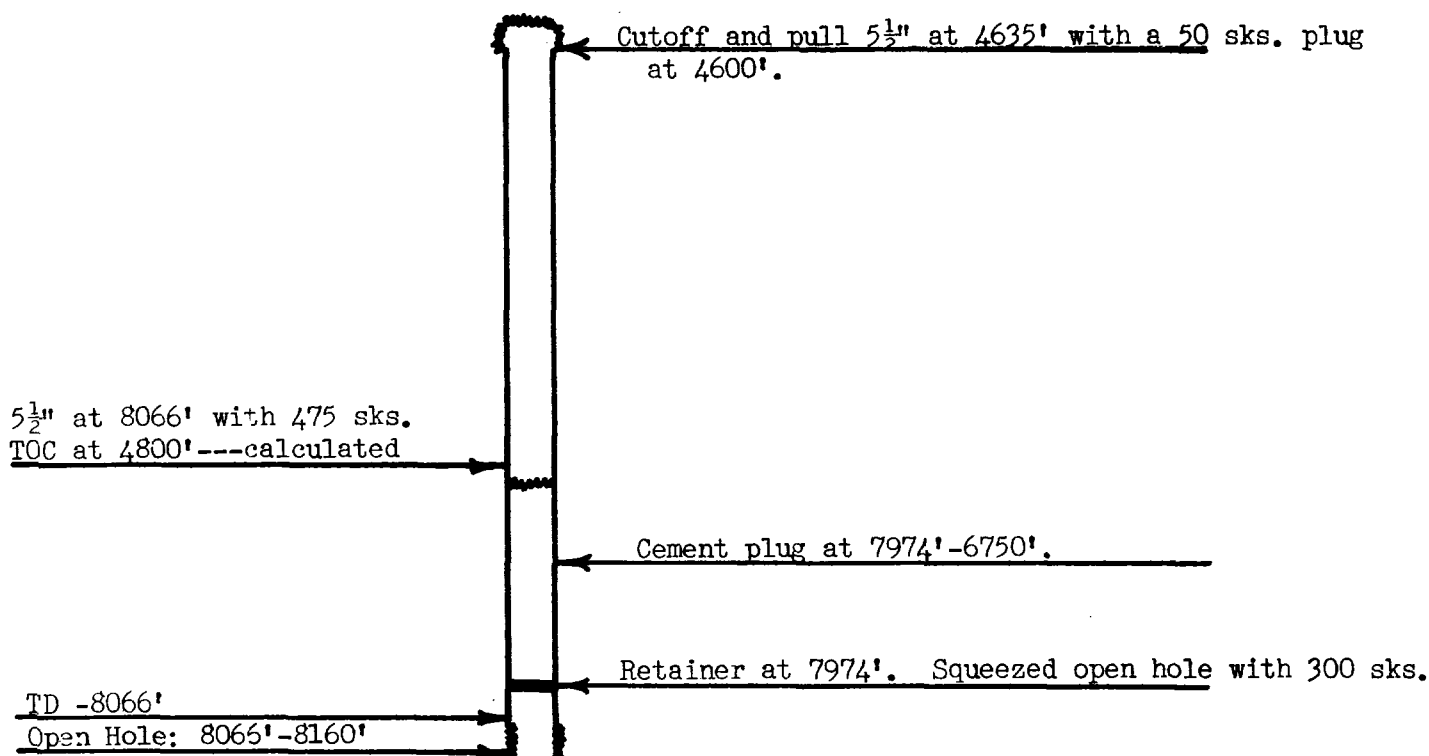
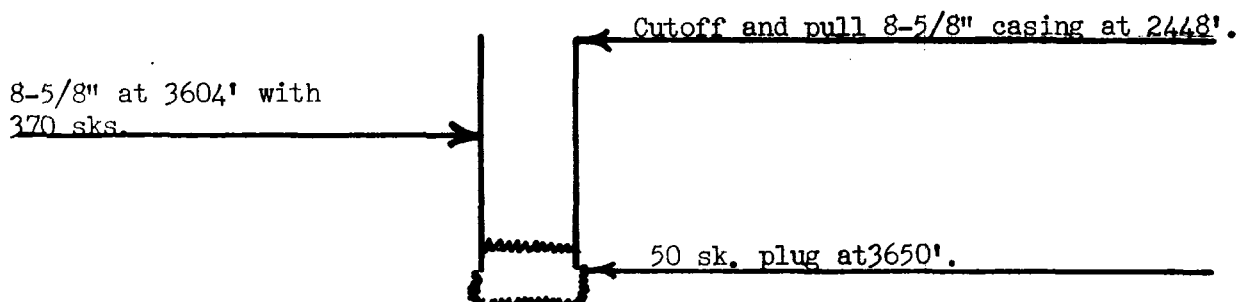
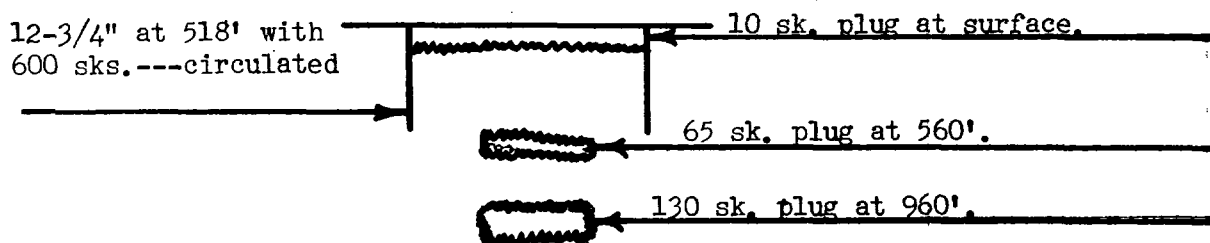
Drilled in 1956.

COOK # 3
Lewis Burleson, Inc.
Unit O 650' FSL-1905' FEL
Section 28-T25S-R37E
Elevation: 3001' GL



Well is presently temporarily abandoned.

U.S. CROSBY #1
 Greathouse and Lovelady Oil & Gas Co. Inc.
 Unit N 660' FSL-1980' FWL
 Section 28-T25S-R37E
 Elevation: 3007' GL



Drilled in 1973. Originally a Crosby Devonian well.

CROSBY DEEP #1
Union Texas Petroleum Corporation
Unit N 330' FSL-1980' FWL
Section 28-T25S-R37E
Elevation: 3006' GL

13-3/8" at 502' with
500 sks.---
circulated

9-5/8" at 3806' with
2324 sks.---
circulated

5-1/2" at 10500' with
920 sks.---
TOC at 5710'

2-3/8" at 8671'

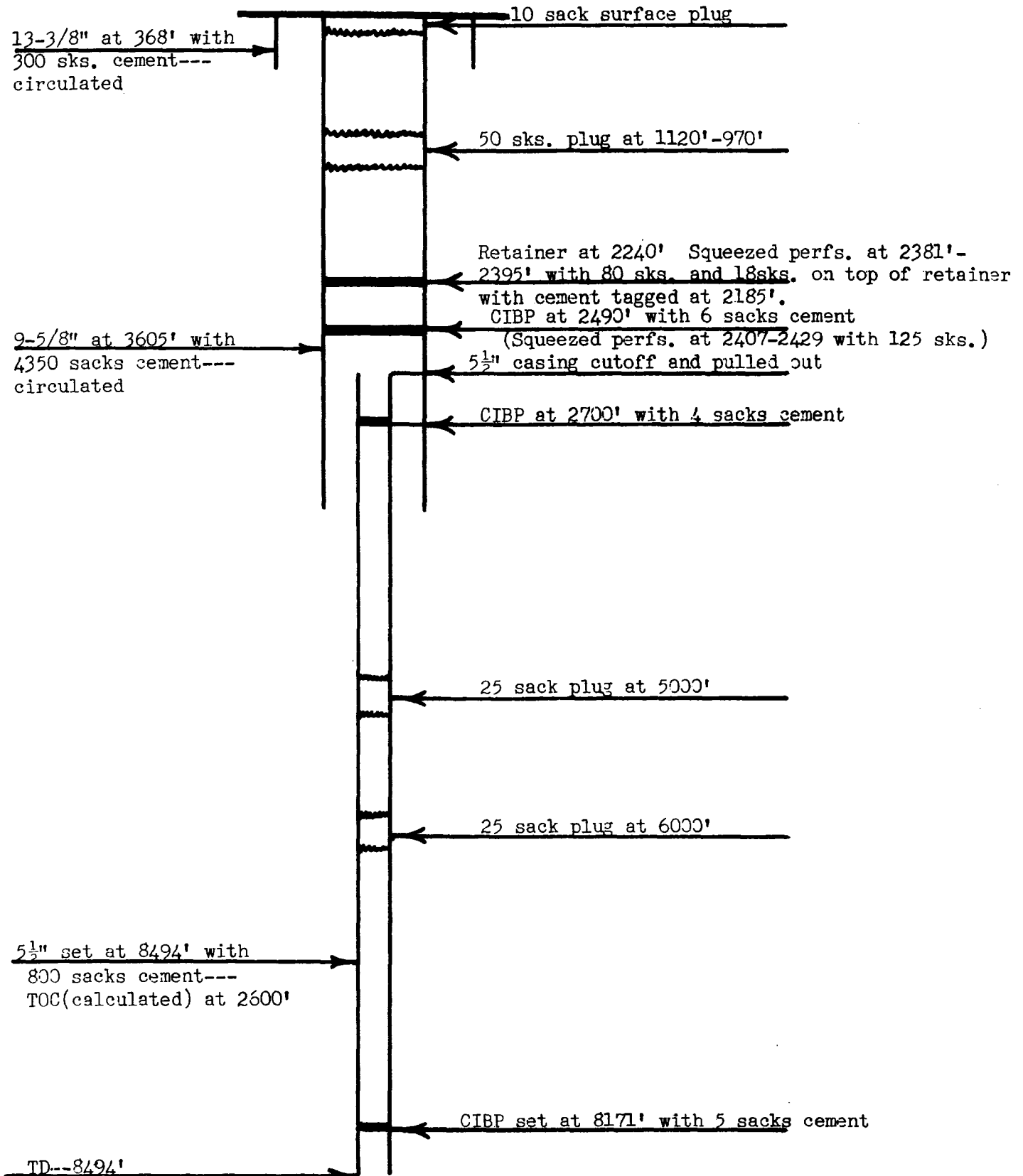
Perfs at 8734' - 8746'

Retainer at 8760' Squeezed perfs at 8774' - 8788'
Retainer at 8850' Squeezed perfs at 8863' - 8880'

TD - 10946'

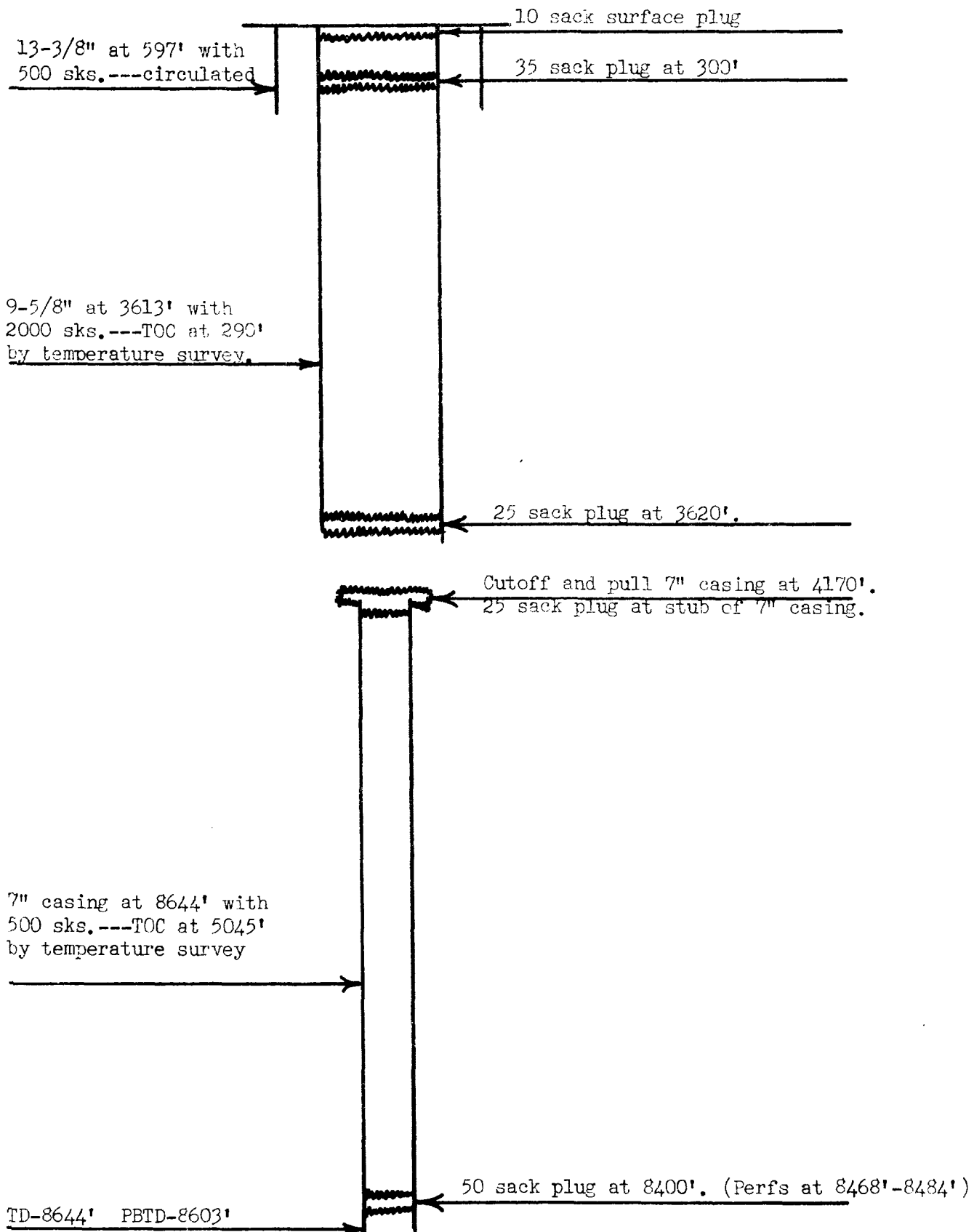
Well was originally drilled in 1971 to the Crosby Devonian formation

ARC FEDERAL #1
 Arco Oil and Gas Company
 Unit K 1980' FSL-1980' FWL
 Section 28-T25S-R37E

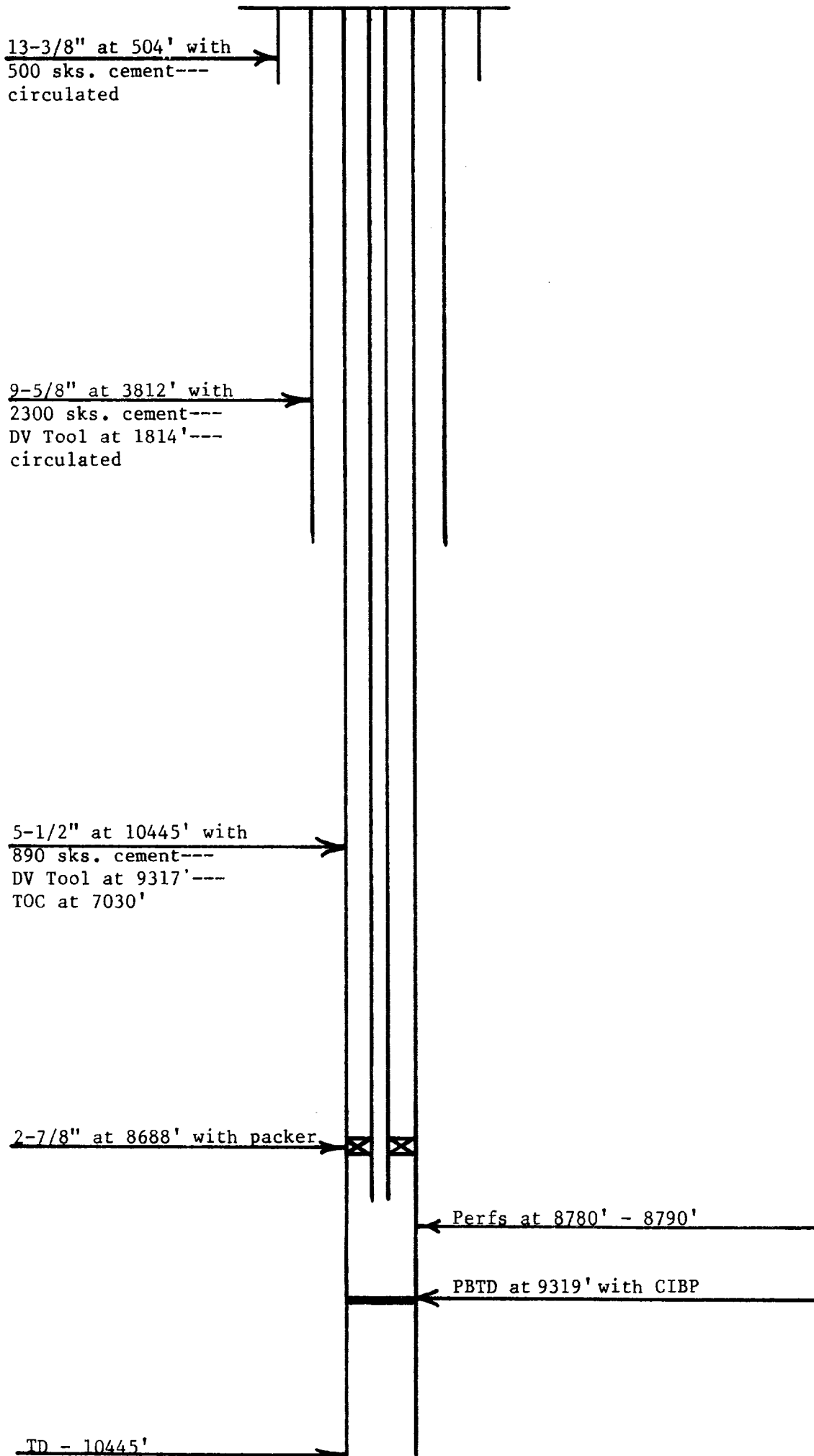


Well was originally drilled in 1954 to the Crosby Devonian formation.
 P and A 11-3-1977.

GUTMAN D #1
 Texas Pacific Oil Company
 Unit I 1830' FSL-660' FEL
 Section 29-T25S-R37E
 Elevation: 3011' GL

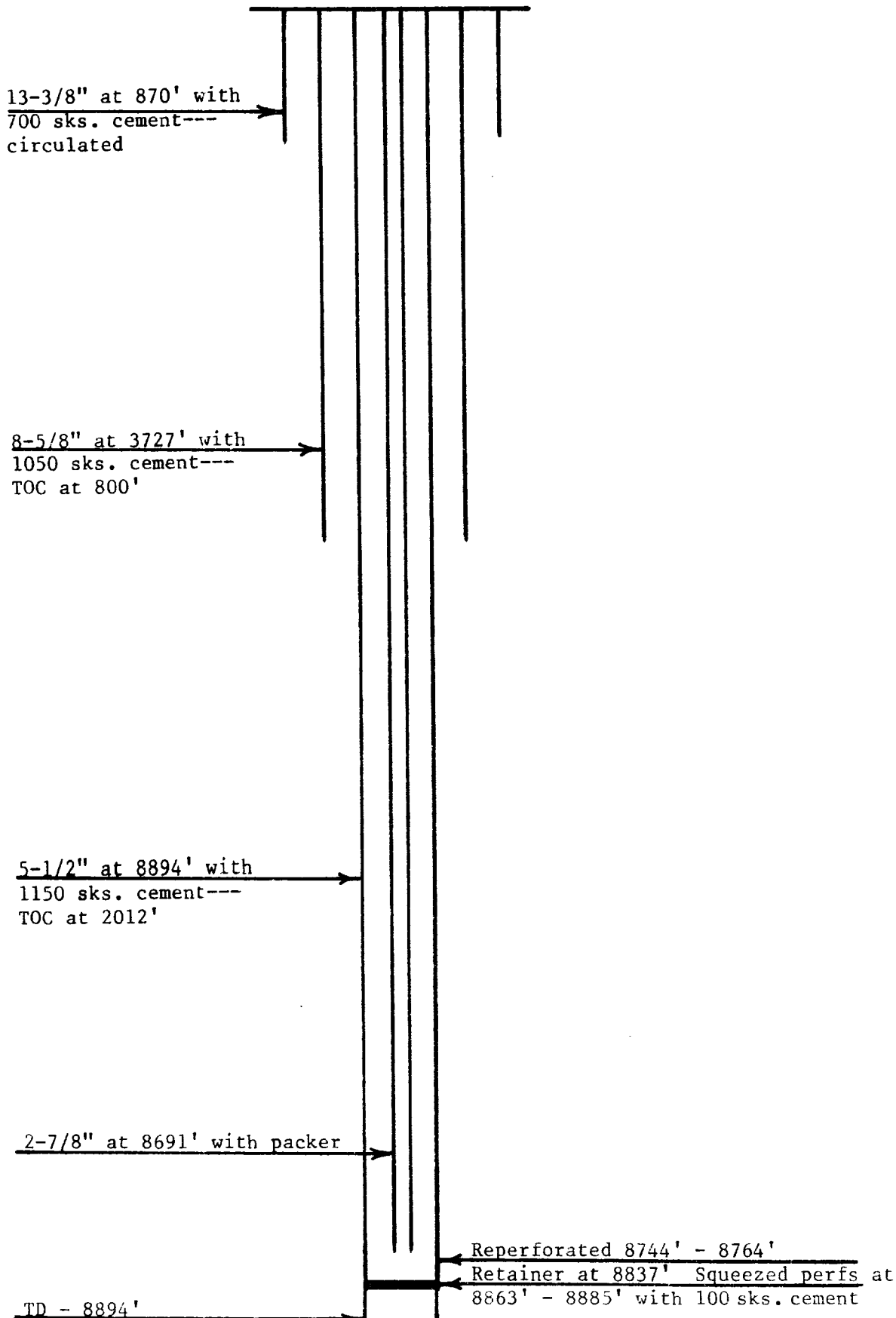


CROSBY DEEP #2
Union Texas Petroleum Corporation
Unit G 1650' FNL-2310' FEL
Section 33-T25S-R37E
Elevation: 2998' GL



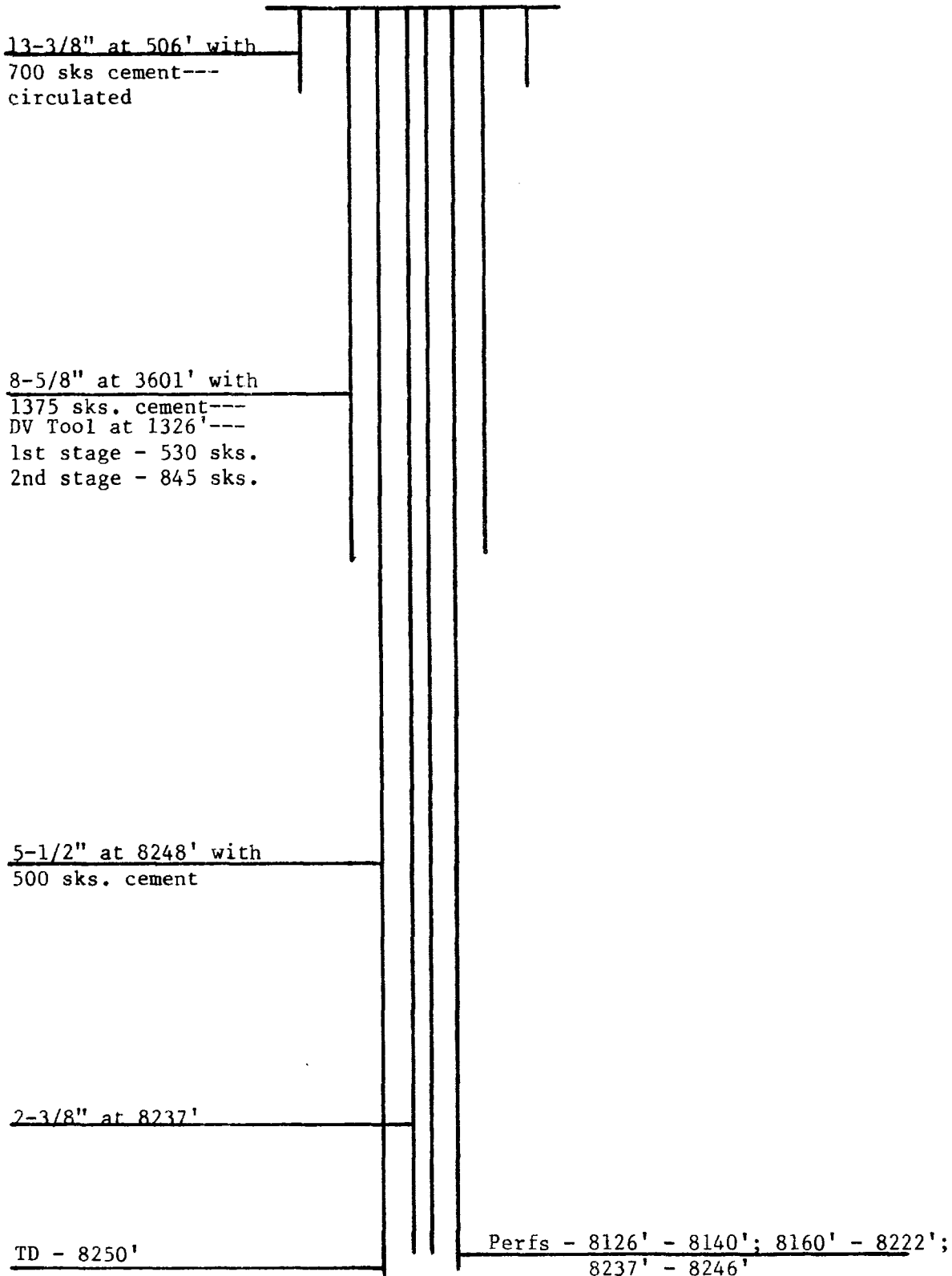
Well was originally drilled in 1972 to the Crosby Fusselman formation.

CROSBY DEEP #4
Union Texas Petroleum Corporation
Unit C 785' FNL-1980' FWL
Section 33-T25S-R37E
Elevation: 3006.8' GL



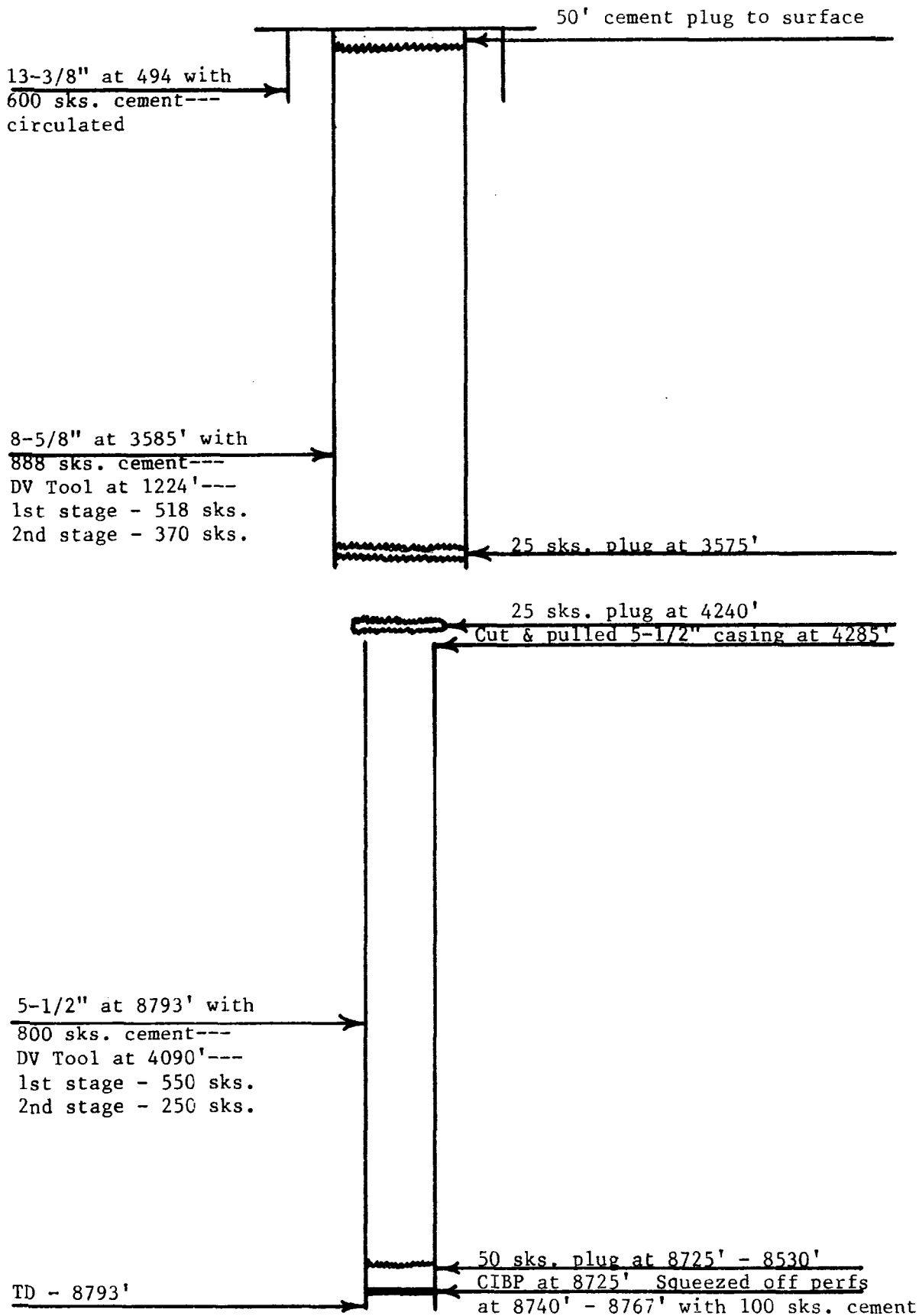
Well was originally drilled in 1978 to the Crosby Fusselman formation.
PBTD at 8775'.

G.W. SHAHAN #2
Gulf Oil Corporation
Unit B 990' FNL-1650' FEL
Section 33-T25S-R37E
Elevation: 3003' GL



Well was originally drilled in 1956 to the Crosby Devonian formation.

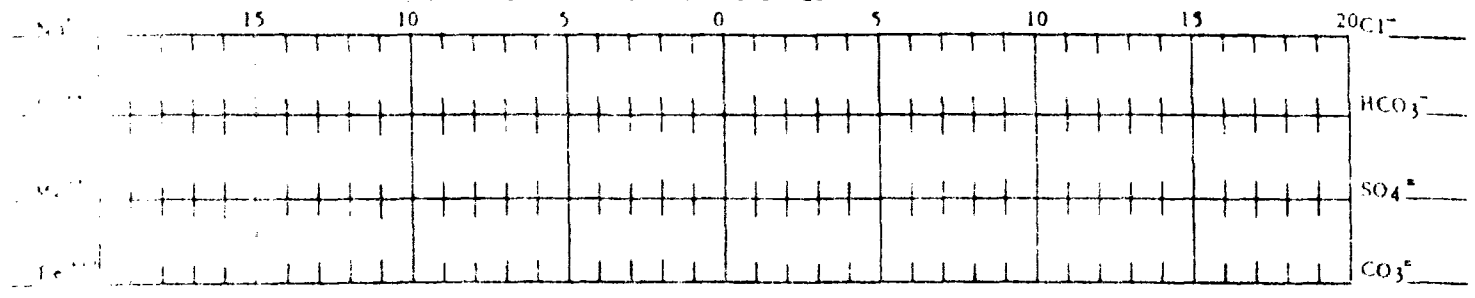
ARNOTT RAMSEY B #3
 Gulf Oil Corporation
 Unit A 660' FNL-660' FEL
 Section 32-T25S-R37E



Well was originally drilled in 1956. Elevation - 3004' GL

N

						SHEET NUMBER	
AREA <i>Alpha - Twenty One</i>						DATE <i>5-11-84</i>	
LOC 				COUNTY OR PARISH <i>LEA</i>		STATE <i>N.M.</i>	
WELL IDENTIFICATION <i>L 1000 Tom Fed</i>		WELL ID, NAME OR NO <i>#1</i>		WATER SOURCE (FORMATION)			
TUBING 	HOLES 	SAMPLE SOURCE <i>wellhead</i>	TEMP, F 	WATER, BBL DAY 	OIL, BBL DAY 	GAS, MMCF DAY 	
TREATMENT <i>5 2-84</i>		TYPE OF WATER <input checked="" type="checkbox"/> PRODUCED		<input type="checkbox"/> SUPPLY		<input type="checkbox"/> WATERFLOOD	
						<input type="checkbox"/> SALT WATER DISPOSAL	

(NUMBER BESIDE ION SYMBOL INDICATES m_e/m^* SCALE UNIT)

DISSOLVED GASES

Fluoride	<u>mg/l*</u>	<u>mg/l*</u>	Hydrogen Sulfide, H ₂ S	<u>mg/l*</u>
Aluminum	<u>120</u>	<u>640</u>	Carbon Dioxide, CO ₂	<u>mg/l*</u>
Chloride	<u>33</u>	<u>640</u>	Oxygen, O ₂	<u>mg/l*</u>
Manganese, Mn	<u>88</u>	<u>1073.6</u>		
(Total Fe)	<u>0.5</u>	<u>10.0</u>	PHYSICAL PROPERTIES	
Iron, Fe			pH	<u>5.5</u>
Calcium, Ca	<u>190.1</u>	<u>4386.1</u>	Eh (Redox Potential)	<u> </u> MV
Sulfate, SO ₄			Specific Gravity	<u> </u>
ONS			Turbidity, JTU Units	<u> </u>
Ammonia	<u>36.7</u>	<u>9500</u>	Total Dissolved Solids (calc.)	<u>17743</u> mg/l*
Nitrate	<u>29.7</u>	<u>1425</u>	Stability Index @ <u> </u> F	
Bicarbonate, HCO ₃			@ <u> </u> F	
Carbonate, HCO ₃	<u>10.6</u>	<u>646.6</u>	CaSO ₄ Solubility @ <u> </u> F	<u> </u> mg/l*
Calcium, Ca			@ <u> </u> F	<u> </u> mg/l*
Sulfate, SO ₄	<u>39</u>	<u>62.5</u>	Max. CaSO ₄ Possible (calc.)	<u> </u> mg/l*
			Max. BaSO ₄ Possible (calc.)	<u> </u> mg/l*
			Residual Hydrocarbons	<u> </u> ppm (Vol/Vol)

Silica ☐ Iron Oxide ☐ Calcium Carbonate ☐ Acid Insoluble ☐

extremely low scaling conditions.
data by low iron count.

* NOTE: me/l and mg/l are commonly used interchangeably for epm and ppm respectively. Where epm and ppm are used, corrections should be made for specific gravity.

NAME <i>Andy Brown</i>	DIST. NO. <i>821</i>	ADDRESS	OFFICE PHONE	HOME PHONE
<i>Crum</i>	DATE <i>5/25/88</i>	DISTRIBUTION	<input type="checkbox"/> CUSTOMER <input type="checkbox"/> AREA OR <input type="checkbox"/> DISTRICT OFFICE <input type="checkbox"/> BTC ENGINEER OR <input type="checkbox"/> BTC LAB <input type="checkbox"/> BTC SALES SUPERVISOR	

WATER TREATING CHEMICALS
WAL INDUSTRIES, INC.

SCALING TENDENCIES OF WATERS

COMPANY: ALPHA TWENTY-ONE
SAMPLE POINT: WELL #1
LOCATION: EL PASO TOM PED
DATE: 12/84

WATER ANALYSIS (MG/L):

TEMPERATURE: 4386.1
TOTAL HARDNESS: 640.6
CALC. HARDNESS: 1073.6
MAGNESIUM: 9500.0
SULFATE: 1425.0
CHLORIDE: 646.6
SODIUM: 10.0
POTASSIUM: 0.

PH: 5.5

UNIT CONVERSION = 0.3854

INDEX VALUES GREATER THAN ZERO INDICATE SCALING CONDITIONS
INDEX VALUES OF ZERO OR LESS INDICATE A STABLE WATER

TEMP.	CALCITE INDEX	GYPSON INDEX	ANHYDRITE INDEX	BARITE INDEX
60	-1.45	-0.55	-0.81	-41.53
70	-1.35	-0.58	-0.73	-41.66
80	-1.22	-0.59	-0.65	-41.78
90	-1.06	-0.59	-0.56	-41.89
100	-0.88	-0.58	-0.47	-41.99
120	-0.62	-0.57	-0.37	-42.07
140	-0.43	-0.55	-0.26	-42.14
160	-0.16	-0.53	-0.14	-42.20
180	0.15	-0.51	-0.01	-42.23
200	0.49	-0.48	0.13	-42.22
260	0.86	-0.46	0.28	-42.16

ILLEGIBLE

WATER ANALYSIS REPORT



NL Treating Chemicals/NL Industries, Inc.
P. O. Box 4305 Houston, Texas 7721

SHEET NUMBER																																															
WELL NAME		DATE																																													
Alpha-Twenty One		5-11-84																																													
COUNTY OR PARISH		STATE																																													
LEA		N.M.																																													
WELL(S) NAME OR NO.	WATER SOURCE (FORMATION)																																														
#2																																															
WELL(S) TYPE	WELL(S) DEPTH, FT.	WELL(S) TEMPERATURE, F	WELL(S) PRODUCTION, BBL/DAY																																												
Wellhead																																															
WATER ANALYSIS PATTERN																																															
(NUMBER BESIDE ION SYMBOL INDICATES mg/l* SCALE UNIT)																																															
<table border="1"> <tr> <td>Na⁺</td> <td>20</td> <td>15</td> <td>10</td> <td>5</td> <td>0</td> <td>5</td> <td>10</td> <td>15</td> <td>20</td> <td>Cl⁻</td> </tr> <tr> <td>Ca⁺⁺</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>HCO₃⁻</td> </tr> <tr> <td>Mg⁺⁺</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>SO₄⁼</td> </tr> <tr> <td>Fe⁺⁺⁺</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>CO₃⁼</td> </tr> </table>				Na ⁺	20	15	10	5	0	5	10	15	20	Cl ⁻	Ca ⁺⁺										HCO ₃ ⁻	Mg ⁺⁺										SO ₄ ⁼	Fe ⁺⁺⁺										CO ₃ ⁼
Na ⁺	20	15	10	5	0	5	10	15	20	Cl ⁻																																					
Ca ⁺⁺										HCO ₃ ⁻																																					
Mg ⁺⁺										SO ₄ ⁼																																					
Fe ⁺⁺⁺										CO ₃ ⁼																																					
<input checked="" type="checkbox"/> PRODUCED <input type="checkbox"/> SUPPLY <input type="checkbox"/> WATERFLOOD <input type="checkbox"/> SALT WATER DISPLACEMENT																																															

SOLVED SOLIDS

IONS
Total Hardness
Calcium, Ca⁺⁺
Magnesium, Mg⁺⁺
Iron (Total), Fe⁺⁺⁺
Sulfate, SO₄⁼
Bicarbonate, HCO₃⁻
Sulfide, S⁼

me/l*

mg/l*

DISSOLVED GASES

Hydrogen Sulfide, H₂S _____ mg/l*
Carbon Dioxide, CO₂ _____ mg/l*
Oxygen, O₂ _____ mg/l*

PHYSICAL PROPERTIES

pH _____ 5.5
Eh (Redox Potential) _____ MV
Specific Gravity _____
Turbidity, JTU Units _____
Total Dissolved Solids (calc.) 13679 mg/l*
Stability Index @ _____ F
CaSO₄ Solubility @ _____ F mg/l*
Max. CaSO₄ Possible (calc.) _____ mg/l*
Max. BaSO₄ Possible (calc.) _____ mg/l*
Residual Hydrocarbons _____ ppm(Vol)

IONS
Sulfate, SO₄⁼
Bicarbonate, HCO₃⁻
Sulfide, S⁼

219.7
13.0

7800
625

4.9
2.6

298.9
41.7

SPENDED SOLIDS (QUALITATIVE)

Sulfide ☐ Iron Oxide ☐ Calcium Carbonate ☐ Acid Insoluble ☐

MARKS AND RECOMMENDATIONS:

Extremely low scaling conditions.

in iron count.

*NOTE: me/l and mg/l are common used interchangeably for epm and ppm respectively. Where epm and ppm are used, corrections should be made for specific gravity.

ENGINEER	DIST. NO.	ADDRESS	OFFICE PHONE	HOME PHONE
Andy Brown	821			
ANALYZED	DATE	DISTRIBUTION		
Crown	5/25/84	<input type="checkbox"/> CUSTOMER <input type="checkbox"/> BTC ENGINEER OR <input type="checkbox"/> AREA OR <input type="checkbox"/> BTC LAB <input type="checkbox"/> DISTRICT OFFICE <input type="checkbox"/> BTC SALES SUPERV		

NO TREATING CHEMICALS
WEL INDUSTRIES, INC.

SCALING TENDENCIES OF WATERS

COMPANY: ALPHA TWENTY-ONE
SAMPLE POINT: WELL #2
LOCATION: EL PASO TOM FED
DATE: 5/7/84

WATER ANALYSIS (MG/L):

SODIUM: 3956.0
CALCIUM: 320.0
MAGNESIUM: 634.4
CHLORIDE: 2800.0
SULFATE: 625.0
BICARBONATE: 298.9
IRON: 3.8
MANGANESE: 0.

PH: 5.5

IONIC STRENGTH = 0.2800

INDEX VALUES GREATER THAN ZERO INDICATE SCALING CONDITIONS
INDEX VALUES OF ZERO OR LESS INDICATE A STABLE WATER

TEMP.	CALCITE INDEX	GYP SUM INDEX	ANHYDRITE INDEX	BARITE INDEX
60	-1.97	-1.08	-1.33	-41.42
80	-1.86	-1.11	-1.26	-41.55
100	-1.74	-1.13	-1.18	-41.67
120	-1.59	-1.13	-1.10	-41.73
140	-1.42	-1.12	-1.00	-41.87
160	-1.22	-1.10	-0.90	-41.95
180	-0.99	-1.08	-0.79	-42.01
200	-0.74	-1.06	-0.66	-42.06
220	-0.46	-1.03	-0.53	-42.08
240	-0.15	-1.00	-0.39	-42.07
260	0.20	-0.96	-0.23	-42.00

ILLEGIBLE

WATER ANALYSIS REPORT

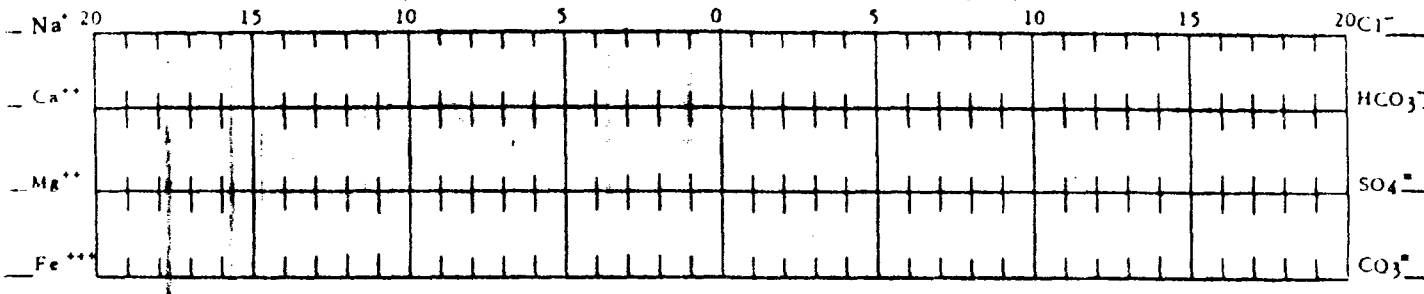


NL Treating Chemicals / NL Industries, Inc
P. O. Box 4305 Houston, Texas 77210

				SHEET NUMBER			
PANY ALPHA - TWENTY ONE				DATE 5-11-84			
COUNTY OR PARISH LEA				STATE N.M.			
SE OR UNIT 1 Paso Tom Federal		WELL(S) NAME OR NO. #3		WATER SOURCE (FORMATION)			
TH. FT.	BHT. F	SAMPLE SOURCE wellhead	TEMP. F	WATER, BBL/DAY	OIL, BBL/DAY	GAS, MMCF/DAY	
E SAMPLED 5-7-84		TYPE OF WATER					
		<input type="checkbox"/> PRODUCED		<input type="checkbox"/> SUPPLY		<input type="checkbox"/> WATERFLOOD	
						<input type="checkbox"/> SALT WATER DISPC	

WATER ANALYSIS PATTERN

(NUMBER BESIDE ION SYMBOL INDICATES mg/l* SCALE UNIT)



SOLVED SOLIDS

IONS
al Hardness
cium, Ca⁺⁺
nesium, Mg⁺⁺
(Total) Fe⁺⁺
ium, Ba⁺⁺
ium, Na⁺ (calc.)

me/l*

mg/l*

DISSOLVED GASES

Hydrogen Sulfide, H₂S
Carbon Dioxide, CO₂
Oxygen, O₂

mg/l*

mg/l*

mg/l*

PHYSICAL PROPERTIES

pH
Eh (Redox Potential)
Specific Gravity
Turbidity, JTU Units
Total Dissolved Solids (calc.)

Stability Index @ F

@ F

CaSO₄ Solubility @ F

@ F

Max. CaSO₄ Possible (calc.)

Max. BaSO₄ Possible (calc.)

Residual Hydrocarbons

mg/l*

mg/l*

mg/l*

mg/l*

mg/l*

ppm (Vol)

IONS
oride, Cl⁻
ate, SO₄
bonate, CO₃
arbonate, HCO₃⁻
roxyl, OH⁻
ide, S⁻

me/l*

mg/l*

PENDED SOLIDS (QUALITATIVE)

Sulfide ☐ Iron Oxide ☐ Calcium Carbonate ☐ Acid Insoluble ☐

MARKS AND RECOMMENDATIONS:

o scaling possibilities
in coast getting high.

* NOTE: me/l and mg/l are common
used interchangeably for epm and pp
respectively. Where epm and ppm a
used, corrections should be made f
specific gravity.

ENGINEER Andy Brown	DIST. NO. 821	ADDRESS	OFFICE PHONE	HOME PHONE
DATE 5/25/84	DISTRIBUTION			
	<input type="checkbox"/> CUSTOMER			
	<input type="checkbox"/> AREA OR			
	<input type="checkbox"/> DISTRICT OFFICE			

NL TREATING CHEMICALS
NL INDUSTRIES, INC.

SCALING TENDENCIES OF WATERS

COMPARIS: ALPHA TWENTY-ONE
SAMPLE POINT: WELL #3
LOCATION: EL PASO TOWNSHIP
DATE: 5/7/84

WATER ANALYSIS (MG/L):

SODIUM: 851.0
CALCIUM: 240.0
MAGNESIUM: 390.4
CHLORIDE: 2500.0
SULFATE: 262.5
BICARBONATE: 225.7
IRON: 13.3
MANGANESE: 0.

PH: 6.0

TOTAL STRENGTH = 0.1062

INDEX VALUES GREATER THAN ZERO INDICATE SCALING CONDITIONS
INDEX VALUES OF ZERO OR LESS INDICATE A STABLE WATER

TEMP.	HALITE INDEX	GYPSON INDEX	ANHYDRITE INDEX	BARITE INDEX
60	-1.41	-1.25	-1.50	-41.08
80	-1.29	-1.29	-1.44	-41.22
100	-1.17	-1.31	-1.36	-41.34
120	-1.04	-1.31	-1.28	-41.44
140	-0.89	-1.31	-1.18	-41.52
160	-0.73	-1.29	-1.08	-41.58
180	-0.54	-1.26	-0.96	-41.62
200	-0.35	-1.23	-0.84	-41.65
220	-0.13	-1.20	-0.70	-41.65
240	0.11	-1.17	-0.55	-41.63
260	0.37	-1.13	-0.40	-41.57

UNICHEM INTERNATIONAL

601 NORTH LEECH

P.O. BOX 1499

HOBBS, NEW MEXICO 88240

COMPANY : ALPHA TWENTY-ONE
 DATE : 3-14-83
 FIELD LEASE & WELL : EL PASO TOM FEDERAL #4
 SAMPLING POINT : WELLHEAD
 DATE SAMPLED : 3-9-83

SPECIFIC GRAVITY = 1.024
 TOTAL DISSOLVED SOLIDS = 38525
 = 6.98

		ME/L	MG/L
CATIONS			
SODIUM	(CA)+2	25.3	507.
MAGNESIUM	(MG)+2	196.	2390.
POTASSIUM	(NA), CALC	407.	9378.
ANIONS			
CARBONATE	(HCO3)-1	32.8	2001.
BICARBONATE	(CO3)-2	0	0
CHLORIDE	(OH)-1	0	0
SULFATE	(SO4)-2	214.	11750.
CHLORIDES	(CL)-1	352.	12497.
DISSOLVED GASES			
CARBON DIOXIDE	(CO2)	NOT RUN	
HYDROGEN SULFIDE	(H2S)	NOT RUN	
OXYGEN	(O2)	NOT RUN	
IRON (TOTAL)	(FE)		7
COPPER	(CU)+2	NOT RUN	
MANGANESE	(MN)	NOT RUN	

SCALING INDEX

TEMP

	30C
	86F
CARBONATE INDEX	351
SODIUM CARBONATE SCALING	LIKELY
SULFATE INDEX	-1.0
SODIUM SULFATE SCALING	UNLIKELY

ILLEGIBLE



ALPHA TWENTY-ONE PRODUCTION COMPANY

POST OFFICE BOX 1206
JAL. NEW MEXICO 88252

505/395-3056

December 7, 1984

Arco Oil & Gas Company
P.O. Box 1710
Hobbs, NM 88240

RE: Gregory "A" Federal No. 3
660' FNL & 660' FWL,
Sec. 33, T-25-S, R-37-E,
Lea County, New Mexico

Gentlemen:

As offset operator or surface owner please find enclosed, as required, a copy of Application to Dispose Produced Water into a Formation Non-Productive of Oil and Gas. We plan to dispose produced water from our El Paso Tom Federal lease into the San Andres formation through the above proposed salt water disposal well which is adjacent to our El Paso Tom Federal lease.

If you desire further information, please contact the New Mexico Oil Conservation Division, P.O. Box 2088, Santa Fe, NM 87501.

Respectfully,

Michael D. Oney,
Drilling Superintendent

MDO/tic
Enclosure

cc: Mrs. Nadine Owen, 909 W. Taos, Hobbs, NM 88240
Lewis B. Burleson, P.O. Box 2479, Midland, TX 79702
El Paso Natural Gas Company, 1800 Wilco Building, Midland, TX 79701
Greathouse & Lovelady Oil & Gas, Inc., P.O. Drawer 2666, Midland, TX 79701
Gulf Oil Corporation, P.O. Box 670, Hobbs, NM 88240
Doyle Hartman, P.O. Box 10426, Midland, TX 79702
Sun Exploration & Production Company, P.O. Box 1861, Midland, TX 79702
Union Texas Petroleum Corporation, 1300 Wilco Building, Midland, TX 79701

AFFIDAVIT OF PUBLICATION

State of New Mexico,

County of Lea.

I, _____

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

December 9, 1984

and ending with the issue dated

December 9, 1984

Robert L. Summers
Publisher.

Sworn and subscribed to before

me this 11 day of

December, 1984
Jane Paulowsky
Notary Public.

My Commission expires _____

3-24, 1989
(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
DECEMBER 9, 1984
Attention: To the public,
listing well to do the work of
Alpha Twenty One Produc-
tion Co., 440 P.M.L., 440 F.W.L.
Gregory A. Edwards #3
Section 37-T-28-S-R-37-E
Lea County, New Mexico
Contact: Mike Oney, P.O. Box
1206, Uvalde, N.M. 88252,
505-395-3056.
NOTE: All interested parties
must file objections or request
for hearing with the Oil Conser-
vation Division, P.O. Box 2068,
Santa Fe, N.M. 87501 within 15
days.



PS Form 3811, July 1983

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 Sun Exploration & Production Co.
 P.O. Box 1861
 Midland, TX 79702

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 115
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

[Circular Postmark: AMER TX DEC 1983]

PS Form 3811, July 1983

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 Mrs. Nadine Owen
 909 W. Taos
 Hobbs, NM 88240

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 104
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

[Circular Postmark: NM DEC 1983]

PS Form 3811, July 1983

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 El Paso Natural Gas Company
 1800 Wilco Building
 Midland, TX 79701

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 111
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

[Circular Postmark: DEC 1983]

PS Form 3811, July 1983

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
 2. ☐ Restricted Delivery.

3. Article Addressed to:
 Gulf Oil Corporation
 P.O. Box 670
 Hobbs, NM 88240

4. Type of Service: Article Number
☐ Registered ☐ Insured
☒ Certified ☐ COD P 713 192 113
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X *[Signature]*

6. Signature - Agent
 X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

[Circular Postmark: DEC 1983]

PS Form 3811, July 1983 447-845

DOMESTIC RETURN RECEIPT

<p>SENDER: Complete items 1, 2, 3 and 4.</p> <p>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. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery.</u> For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.</p>	
<p>1. <input type="checkbox"/> Show to whom, date and address of delivery.</p> <p>2. <input type="checkbox"/> Restricted Delivery.</p>	
<p>3. Article Addressed to:</p> <p>2666 79701</p> <p>USPO 1984 DEC 13 MIDLAND</p>	
<p>4. Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail</p>	<p>Article Number: P 713192112</p>
<p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>	
<p>5. Signature -- Addressee</p> <p>X</p>	
<p>6. Signature -- Agent</p> <p>X <i>Dany Stokker</i></p>	
<p>7. Date of Delivery</p> <p>12-13-84</p>	
<p>8. Addressee's Address (ONLY if requested and fee paid)</p>	

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

Sun Exploration & Production Co.
P.O. Box 1861
Midland, TX 79702

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 115

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

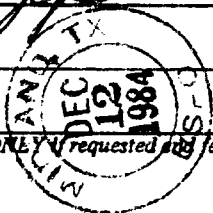
X *[Signature]*

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

**SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

Mrs. Nadine Owen
909 W. Taos
Hobbs, NM 88240

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 104

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

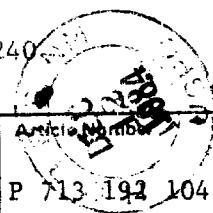
X *[Signature]*

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

**SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

El Paso Natural Gas Company
1800 Wilco Building
Midland, TX 79701

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 111

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

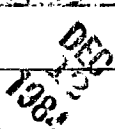
X *[Signature]*

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

**SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

Gulf Oil Corporation
P.O. Box 670
Hobbs, NM 88240

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P 713 192 113

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X *[Signature]*

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

