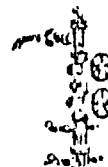


# FROSTMAN OIL CORP.

P. O. Drawer W  
Artesia, New Mexico 88210

PHONE 746-3344



July 25, 1986

Richard L. Stamets  
Director  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501

Dear Mr. Stamets:

Enclosed herewith in duplicate is Application of Frostman Oil Corporation for the authority to inject produced water in the Red Twelve State Well No. 4 located 990 FSL and 2310 FEL of Section 5, Township 17 South, Range 29 East, Eddy County, New Mexico. Application is made pursuant to Rule 701D of the Division in Rules and Regulations for administrative approval for disposal into the San Andres formation. Publication of Frostman's intent to utilize the subject well for water disposal has been made in the Artesia Daily Press and copies of this application have been furnished to each leasehold operator within 1/2 mile of the well. The State of New Mexico is the owner of the surface of the land upon which the well is located.

Your approval of the subject application as the expiration of the required 15 day waiting period is respectfully requested.

Sincerely,

Clarence Forister

CF/rn

Enclosures

BEFORE EXAMINER SIGNATURE	
OIL CONSERVATION DIVISION	
App.	EXHIBIT NO. 1
CASE NO.	8982

P 180 950 452

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982  
\* U.S.G.P.O. 1984-446-014

Sent to Richard L. Stamets, Director	
Street and No. Oil Conservation Division	
P.O. Box 2088	
P.O., State and ZIP Code Santa Fe, NM 87501	
Postage	\$ 124
Certified Fee	75
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	70
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 269
Postmark of Date	NOV 20 1986 7/25/86

PS Form 3811, Jan. 1979

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

1. The following service is requested (check one.)

- Show to whom and date delivered. ....
- Show to whom, date and address of delivery. ....
- RESTRICTED DELIVERY  
Show to whom and date delivered. ....
- RESTRICTED DELIVERY.  
Show to whom, date, and address of delivery. \$ .....

(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
Richard L. Stamets, Director  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, NM 87501

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	180590452	

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE  Addressee  Authorized agent

DATE OF DELIVERY

POSTMARK

ADDRESS (Complete only if requested)

UNABLE TO DELIVER BECAUSE:

CLERK'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION FOR ADMINISTRATIVE APPROVAL

FROSTMAN OIL CORPORATION

FOR CONVERSION TO WATER DISPOSAL

RED TWELVE STATE WELL NO. 4

Located 990 FSL & 2310 FEL, Sec. 5, T-17S, R-29E  
Eddy County, New Mexico

TABLE OF CONTENTS

<u>ITEM</u>	<u>ATTACHMENT</u>
Application	Form C-108
Injection Well Data Sheet	Form C-108 III
Map of Area Showing Well & Lease Ownership	Form C-108 V
Well Data-Wells in Area of Review	Form C-108 VI
Data Sheet	Form C-108 VII
Disposal Water Analysis	Form C-108 VII(a)
Stimulation Program	Form C-108 IX
Logging and Test Data	Form C-108 X
Fresh Water Analysis	Form C-108 XI
Affirmative Statement	Form C-108 XII
Proof of Notice (to offset operators)	Form C-108 XIV(a)
Proof of Notice (by publication)	Form C-108 XIV(b)
Exhibit "A"	
Exhibit "B"	
Exhibit "C"	

APPLICATION FOR AUTHORIZATION TO INJECT

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

II. Operator: Frostman Oil Corporation

Address: P. O. Drawer W, Artesia, New Mexico 88210

Contact party: Clarence Forister Phone: 746-3344

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: FROSTMAN OIL CORPORATION Title: President

Signature: Clarence Forister Date: 7/28/86

Clarence Forister

\* 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.**

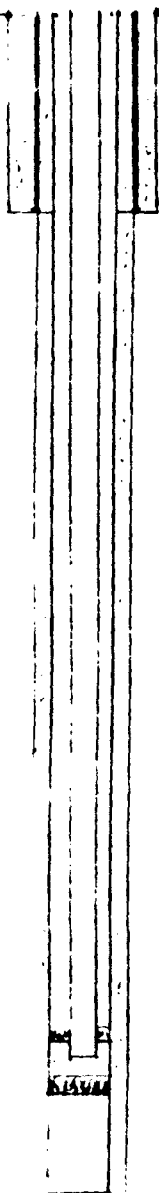
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**NOTICE:** Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

Frostman Oil Corporation		Red Twelve State		
OPERATOR		LEASE		
4	990 FSL 2310 FEL.	5	17S	29E
WELL NO.	FOOTAGE LOCATION	SECTION	TOWNSHIP	RANGE

Schematic



Tabular Data

Surface Casing

Size 8 5/8 " Cemented with 250 sx.  
 TOC surface feet determined by circulated  
 Hole size 12 1/4"

Intermediate Casing

Size N/A " Cemented with \_\_\_\_\_ sx.  
 TOC \_\_\_\_\_ feet determined by \_\_\_\_\_  
 Hole size \_\_\_\_\_

Long string

Size 5 1/2 " Cemented with 950 sx.  
 TOC surface feet determined by cement circulated  
 Hole size 7 7/8"  
 Total depth 3,550

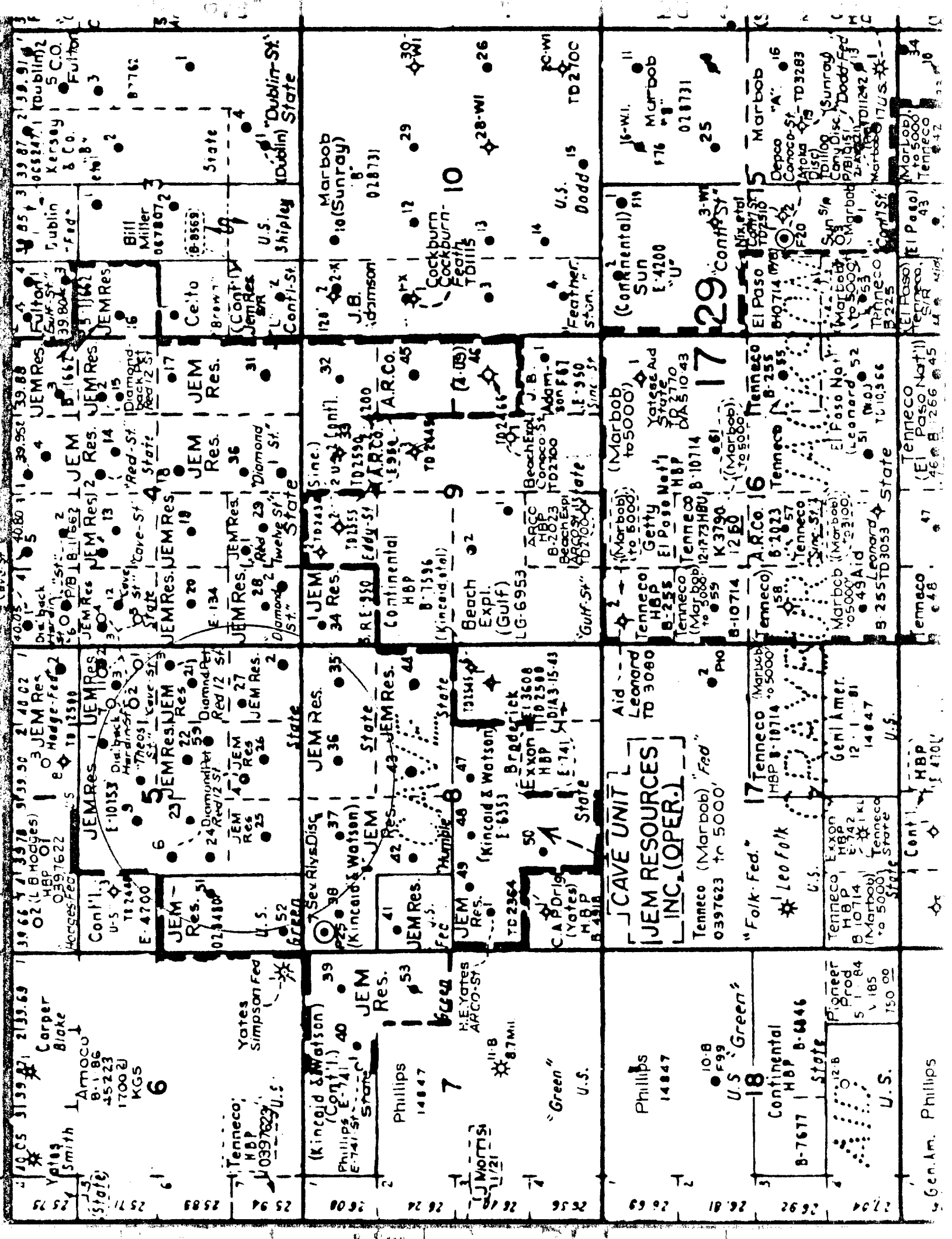
Injection interval

3,004 feet to 3,434 feet  
 (perforated or open-hole, indicate which)

Tubing size 2 3/8" lined with plastic coating set in a  
 (material)  
5 1/2" Giberson Uni VI packer at 2,900 feet  
 (brand and model)  
 (or describe any other casing-tubing seal).

Other Data

- Name of the injection formation San Andres
- Name of Field or Pool (if applicable) Cave Grayburg San Andres
- Is this a new well drilled for injection?  Yes  No  
 If no, for what purpose was the well originally drilled? Oil & Gas production
- 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) No other zones  
have been perforated.
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. Overlying pools are the Seven Rivers Queen Grayburg to approximately  
2,380'.  
Presently there are no known underlying oil or gas zone.



39 87 2 39.91  
055241 Dublin  
Kersey & Co.  
5 C.O.  
Fulton

Bill Miller  
0878072

State  
"Dublin-St."  
Dublin State

Fulton  
Conf'l. St.  
JEM Res.

Cento  
Brow

U.S.  
Shipley  
Conf'l. St.

Marbob  
(Sunray)

12 29 30  
Cockburn  
Feather  
TBillis

U.S.  
Dodd  
TD270C

16-WI.  
Murbob  
176  
028731  
25

El Paso  
040714  
29

Marbob  
Depco  
Atoka  
Tolllog  
Cony Disc  
PBI 015  
Zack  
Marbob  
TD11242  
Marbob  
17US  
Marbob  
El Paso  
Tenneco  
17US

Marbob  
El Paso  
Tenneco  
17US

40.05  
40.80  
41.11  
39.95  
39.88  
JEM Res.

JEM Res.

JEM Res.

1 JEM  
34 Res.

Continental  
HBP

Beach  
Expl.  
(Gulf)

Tenneco  
HBP  
Marbob

Tenneco  
Marbob

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Marbob

JEM Res.

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JEM Res.

WELL DATA-WELLS IN AREA OF REVIEW

Attached as Exhibit "A" and "B" are copies of the well files for the Red Twelve State No. 3 and the Red Twelve State No. ~~A~~ 6. These wells appear to be the only wells which fall within the area of review and penetrate the proposed injection zone.

Attachment C-108 VI



DATA SHEET

(Section VII, Form C-108)

1. Proposed Rate of Injection
  - A. Average daily rate of injection: 700 barrels
  - B. Maximum daily rate of injection: 900 barrels
2. Type of System

System will be open
3. Anticipated Injection Pressure

It is anticipated that the injection pressure will be nominal but in no event would the pressure exceed 0.2 psi per foot of depth to the top of the injection zone at 3,004 feet, or 600 psi.
4. Source of Injection Water

Source of disposal water is Grayburg wells located in Section 4, 5, 7, 8, and 9 of Township 17 South, Range 29 East. See Attachment VII(a) for analysis of disposal water.
5. Disposal Zone Water Analysis

Disposal is to be into a zone productive of oil and gas by only Frostman Oil Corporation within the area of review. See Attachment VII(a) for analysis of receiving formation water.

Attachment C-108 VII

DISPOSAL WATER ANALYSIS  
HALLIBURTON DIVISION LABORATORY  
HALLIBURTON SERVICES  
MIDLAND DIVISION  
ARTESIA, NEW MEXICO 88210  
LABORATORY WATER ANALYSIS

No. W316 & W317-86

To Mr. Clarence Forister  
Frostman Oil Company  
P. O. Drawer W  
Artesia, NM 88210

Date July 23, 1986

This report is the property of Halliburton Company and neither it nor any part thereof nor a copy thereof is to be published or disclosed without first securing the express written approval of laboratory management; it may however, be used in the course of regular business operations by any person or concern and employees thereof receiving such report from Halliburton Company.

Submitted by Steve Forister Date Rec. July 22, 1986

Well No. \_\_\_\_\_ Depth \_\_\_\_\_ Formation \_\_\_\_\_

County Eddy Field \_\_\_\_\_ Source \_\_\_\_\_

	<u>C.P.U. Premier</u>	<u>Red 12 St. #2, S.A.</u>	
Resistivity .....	<u>0.081 @ 71°</u>	<u>0.053 @ 71°</u>	
Specific Gravity .....	<u>1.07</u>	<u>1.129</u>	
pH .....	<u>8.2</u>	<u>6.9</u>	
Calcium (Ca) .....	<u>4,829</u>	<u>2,498</u>	*MPL
Magnesium (Mg) .....	<u>1,719</u>	<u>640</u>	
Chlorides (Cl) .....	<u>60,000</u>	<u>114,000</u>	
Sulfates (SO <sub>4</sub> ) .....	<u>Heavy</u>	<u>Heavy</u>	
Bicarbonates (HCO <sub>3</sub> ) .....	<u>488</u>	<u>763</u>	
Soluble Iron (Fe) .....	<u>Nil</u>	<u>Nil</u>	
.....			
.....			
.....			

Remarks:

\*Milligrams per liter

Rocky Chambers  
Respectfully submitted,

Analyst: Rocky Chambers - Field Engineer  
cc:

HALLIBURTON COMPANY

NOTICE

This report is limited to the described sample tested. Any user of this report agrees that Halliburton shall not be liable for any and all claims, damages, or expenses resulting from such report or its use.

STIMULATION PROGRAM

The proposed disposal well was originally drilled in September, 1984 to test the San Andres formation. The well is currently open in that formation.

Existing perforations will be utilized. Treatment of the interval would consist of 1,000 gallons of 15% NE acid.

Attachment Form C-108 IX

LOGGING DATA

(Section X, Form C-108)

The Dresser Atlas Compensated Neutron Log run on the subject well on September 21, 1984 is included here as Exhibit "C" to this Data Sheet, with the proposed disposal interval marked in red thereon.

Attachment C-108 X

FRESH WATER ANALYSIS

There are no fresh water wells within 1 mile of the proposed injection well.

Attachment C-108 XI

AFFIRMATIVE STATEMENT

Applicant hereby affirms that he has examined the available geologic and engineering data and finds no evidence of open faults or other hydrologic connections between the disposal zone and any underground source of drinking water.

Attachment C-108 XII

# FROSTMAN OIL CORP.

P. O. Drawer W  
Artesia, New Mexico 88210

PHONE 746-3344



July 25, 1986

Kincaid & Watson  
P. O. Box 498  
Artesia, New Mexico 88210

RE: Proposed Disposal Well

Gentlemen:

Enclosed you will find an application for a Proposed Disposal Well located in Section 5, Township 17 South, Range 29 East, Eddy County, New Mexico.

If you have any questions regarding this application, please contact Clarence Forister at (505) 746-3344. If you have an objection to the application, please sign below and return one copy of this letter to Frostman Oil Corporation, c/o Clarence Forister, and one copy to the Oil Conservation Division in Santa Fe, New Mexico.

Sincerely,

*Clarence Forister*  
Clarence Forister

CF/rn

Enclosures

CRRR

Kincaid & Watson has an objection to the proposed disposal well.

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

P 180 950 449

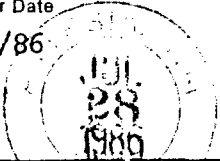
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(See Reverse)


★ U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

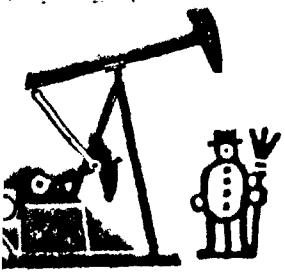
Sent to <b>Kincaid &amp; Watson</b>	
Street and No. <b>P. O. Box 498</b>	
P.O., State and ZIP Code <b>Artesia, NM 88210</b>	
Postage	\$ <b>56</b>
Certified Fee	<b>75</b>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	<b>70</b>
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <b>210</b>
Postmark or Date	<b>7/25/86</b> 

PS Form 3811, Jan. 1979

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 3. Add your address in the "RETURN TO" space on reverse.	
1. The following service is requested (check one.) <input checked="" type="checkbox"/> Show to whom and date delivered..... <input type="checkbox"/> Show to whom, date and address of delivery..... <input type="checkbox"/> RESTRICTED DELIVERY Show to whom and date delivered..... <input type="checkbox"/> RESTRICTED DELIVERY. Show to whom, date, and address of delivery. \$ ____  (CONSULT POSTMASTER FOR FEES)	
2. ARTICLE ADDRESSED TO: <b>Kincaid &amp; Watson</b> <b>P. O. Box 498</b> <b>Artesia, NM 88210</b>	
3. ARTICLE DESCRIPTION: REGISTERED NO.   CERTIFIED NO.   INSURED NO. <b>180950449</b> (Always obtain signature of addressee or agent)	
I have received the article described above. SIGNATURE <input type="checkbox"/> Addressee <input type="checkbox"/> Authorized agent 	
DATE OF DELIVERY <b>7-29-86</b>	POSTMARK
5. ADDRESS (Complete only if requested)	
6. UNABLE TO DELIVER BECAUSE:	CLERK'S INITIALS





# FROSTMAN OIL CORP.

P. O. Drawer W  
Artesia, New Mexico 88210  
PHONE 746-3344



July 25, 1986

Conoco, Inc.  
P. O. Box 1959  
Midland, Texas 79702

RE: Proposed Disposal Well

Gentlemen:

Enclosed you will find an application for a Proposed Disposal Well located in Section 5, Township 17 South, Range 29 East, Eddy County, New Mexico.

If you have any questions regarding this application, please contact Clarence Forister at (505) 746-3344. If you have an objection to the application, please sign below and return one copy of this letter to Frostman Oil Corporation, c/o Clarence Forister, and one copy to the Oil Conservation Division in Santa Fe, New Mexico.

Sincerely,

Clarence Forister

CF/rn

Enclosures

CRRR

Conoco, Inc. has an objection to the proposed disposal well.

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

P 180 950 450


RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

U.S.G.P.O. 1984-448-014

PS Form 3800, Feb. 1982

Sent to <b>Conoco, Inc.</b>	
Street and No. <b>P. O. Box 1959</b>	
P.O., State and ZIP Code <b>Midland, TX 79702</b>	
Postage	\$ <b>56</b>
Certified Fee	<b>75</b>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	<b>70</b>
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <b>210</b>
Postmark or Date <b>7/25/86</b> 	

PS Form 3811, Jan. 1978  
RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

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


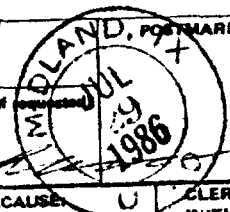
1. The following service is requested (check one.)  
 Show to whom and date delivered.....  
 Show to whom, date and address of delivery.....  
 RESTRICTED DELIVERY  
 Show to whom and date delivered.....  
 RESTRICTED DELIVERY.  
 Show to whom, date, and address of delivery.....  
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
**Conoco, Inc.**  
**P. O. Box 1959**  
**Midland, TX 79702**

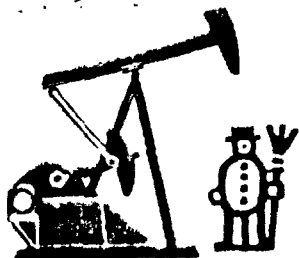
3. ARTICLE DESCRIPTION:  
 REGISTERED NO. CERTIFIED NO. INSURED NO.  
 \_\_\_\_\_ **180950450** \_\_\_\_\_  
 (Always obtain signature of addressee or agent)

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

4. DATE OF DELIVERY

5. ADDRESS (Complete only if registered)  
  


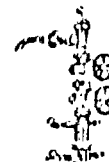
6. UNABLE TO DELIVER BECAUSE \_\_\_\_\_ CLERK'S INITIALS \_\_\_\_\_



# FROSTMAN OIL CORP.

P. O. Drawer W  
Artesia, New Mexico 88210

PHONE 746-3344



July 25, 1986

Commissioner of Public Lands  
P. O. Box 1148  
Santa Fe, New Mexico 87504-1148

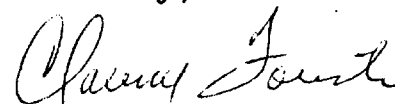
RE: Proposed Disposal Well

Gentlemen:

Enclosed you will find an application for a Proposed Disposal Well located in Section 5, Township 17 South, Range 29 East, Eddy County, New Mexico.

If you have any questions regarding this application, please contact Clarence Forister at (505) 746-3344. If you have an objection to the application, please sign below and return one copy of this letter to Frostman Oil Corporation, c/o Clarence Forister, and one copy to the Oil Conservation Division in Santa Fe, New Mexico.

Sincerely,

  
Clarence Forister

CF/rn

Enclosures

CRRR

Commissioner of Public Lands has an objection to the proposed disposal well.

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

P 180 950 451

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982  
\* U.S.G.P.O. 1984-446-014

Sent to Commissioner of Public Lands	
Street and No. P. O. Box 1148	
P. O. State and ZIP Code Santa Fe, NM 87504-1148	
Postage	\$ 56
Certified Fee	75
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	76
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 210
Postmark or Date 7/25/86	



PS Form 3811, Jan. 1979

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

1. The following service is requested (check one.)  
 Show to whom and date delivered. \_\_\_\_\_ \$  
 Show to whom, date and address of delivery. \_\_\_\_\_ \$  
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2. ARTICLE ADDRESSED TO:  
 Commissioner of Public Lands  
 P. O. Box 1148  
 Santa Fe, NM 87504-1148

3. ARTICLE DESCRIPTION:  
 REGISTERED NO. CERTIFIED NO. INSURED NO.  
 180950451  
 (Always obtain signature of addressee or agent)

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

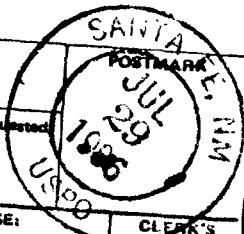
4. DATE OF DELIVERY  
 25 JUL 1986

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: \_\_\_\_\_  
 CLERK'S INITIALS \_\_\_\_\_

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

☆ GPO : 1979-238-848



# Affidavit of Publication

Copy of Publication

No. 11646

STATE OF NEW MEXICO,  
County of Eddy:

Gary D. Scott being duly sworn, says: That he is the Publisher of The Artesia Daily Press, a daily newspaper of general circulation, published in English at Artesia, said county and state, and that the hereto attached Legal Notice

was published in a regular and entire issue of the said Artesia Daily Press, a daily newspaper duly qualified for that purpose within the meaning of Chapter 167 of the 1937 Session Laws of

the State of New Mexico for 1 days consecutive weeks on the same day as follows:

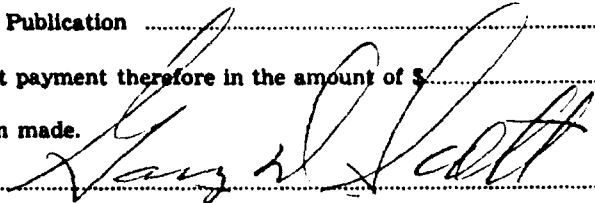
First Publication July 28, 1986

Second Publication

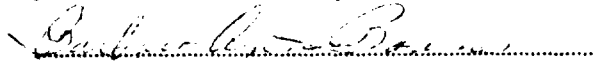
Third Publication

Fourth Publication

and that payment therefore in the amount of \$ has been made.



Subscribed and sworn to before me this 29th day of July, 1986.

  
Notary Public, Eddy County, New Mexico

My Commission expires September 23, 1987

## LEGAL NOTICE

Notice is hereby given pursuant to Rule 701B3 of the New Mexico Oil Conservation Division Rules and Regulations that it is the intent of Forstman Oil Corporation to utilize the Red Twelve State No. 4 located 990 FSL and 2310 FEL of Section 5, Township 17 South, Range 29 East, N.M.P.M., Eddy County, New Mexico for the underground disposal of produced water. Injection will average 700 barrels per day but could go as high as 900 barrels per day. Maximum injection pressure will not exceed 600 psi. Questions regarding this proposal may be directed to Clarence Forister, Forstman Oil Corporation, P.O. Drawer W, Artesia, New Mexico 88210, 746-3344.

Objection to this proposal or request for hearing on the matter together with the reasons, therefore, must be filed in writing with the Oil Conservation Division, P.O. Box 2083, Santa Fe, New Mexico 87501 within 15 days after date of publication of this notice.

Published in the Artesia Daily Press, Artesia, N.M., July 28, 1986.

Legal No. 11646.

**RECEIVED**  
**OIL CONSERVATION DIVISION**

**DEC 17 1984**  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
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OPERATOR	1

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

State             
5. State Oil & Gas Lease #  
**B-7596**

TYPE OF WELL  
OIL WELL  GAS WELL  DRY  OTHER   
TYPE OF COMPLETION  
NEW WELL  WORK OVER  DEEPEN  PLUG BACK  DIFF. RESVR.  OTHER

7. Unit Agreement Name  
8. Farm or Lease Home  
Red Twelve Star  
9. Well No. 3

Name of Operator  
**J.E.M. Resources Inc.**  
Address of Operator  
**P.O. Box 2938 Ruidoso, N.M. 88345**

10. Field and Pool, or PUD  
**Cave GR/S**

Location of Well  
BY LETTER I LOCATED 2310 FEET FROM THE South LINE AND 330 FEET FROM  
East LINE OF SEC. 5 TWP. 17S RGE. 29E NMPM

12. County  
**Eddy**

13. Date Spudded 9-5-84 16. Date T.D. Reached 9-12-84 17. Date Compl. (Ready to Prod.) 10-3-84 18. Elevations (DF, RKB, RT, GR, etc.) 3603 GR 19. Elev. Casings 3604

20. Total Depth 3550 21. Plug Back T.D. 3528 22. If Multiple Compl., How Many            23. Intervals Drilled By: Rotary Tools All Cable Tools           

24. Producing Interval(s), of this completion - Top, Bottom, Name  
3004-3434 San Andres 25. Was Interval Logged NO

26. Type Electric and Other Logs Run  
CNL/FDC/DLL 27. Was Well Cased NO

**CASING RECORD (Report all strings set in well)**

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PER
8 5/8	24#	350	12 1/2	350 sxs	None
5 1/2	17#	3550	7 7/8	850 sxs	none

**LINER RECORD**

**30. TUBING RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER
					2 5/8	3450	Free

28. Perforation Record (Interval, size and number)  
3004-3434 37 0.36 cal. shots

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
3004-3434	5500 gal 15% HCL
	130,000 gal gel wbr.
	243,000 # 20/40

**PRODUCTION**

29. First Production 10-20-84 Production Method (Flowing, gas lift, pumping - Size and type pump) Pump Well Status (Producing, etc.) Prod

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas-Oil Ratio
11-23-84	24	7/8"		60	200	250	40-1

31. Flow Tubing Press.            Casing Pressure 20# Calculated 24-Hour Rate            Oil - Bbl.            Gas - MCF            Water - Bbl.            Oil Gravity - API           

33. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold Test Witnessed By Rex Glenn

34. List of Attachments  
Logs Reveation Survey

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-completed deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including well stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. This form is to be filed in quadruplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____ 295	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
II. Salt _____ 660	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. _____ 1000	T. Devonian _____	T. Menefee _____	T. Madison _____
T. _____ 1635	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____ 2004	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____ 2382	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzite _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Dlinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todillo _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....	No. 4, from.....to.....
No. 2, from.....to.....	No. 5, from.....to.....
No. 3, from.....to.....	No. 6, from.....to.....

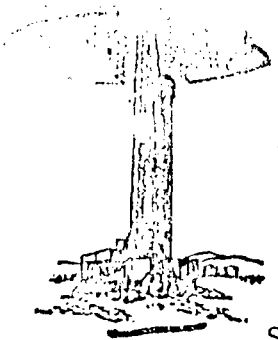
IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....	.....feet
No. 2, from.....to.....	.....feet
No. 3, from.....to.....	.....feet
No. 4, from.....to.....	.....feet

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	295	295	Red clay + Calchie				
295	660	365	Salt				
660	1635	975	anhy; Dolomite				
1635	2004	369	Red sand + anhy				
2004	2382	378	Dolomite sands				
2382	3550	1168	Dolomite				



LaRue Drilling Co., Inc. — Oil Well Drilling Contractors

P. O. BOX 202 ARTESIA, NEW MEXICO 470

September 21, 1984

JEM Resources  
PO Box 2938  
Ruidoso, NM 88345

Re: Red Twelve State #3  
2310' FSL & 330' FEL  
Sec. 5, T17S, R29E  
Eddy County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above captioned well.

DEPTH	DEVIATION
350'	1/4 <sup>o</sup>
842'	1/4 <sup>o</sup>
1340'	1/4 <sup>o</sup>
1841'	1/4 <sup>o</sup>
2338'	1/2 <sup>o</sup>
2847'	1/2 <sup>o</sup>
3550'	1 1/2 <sup>o</sup>

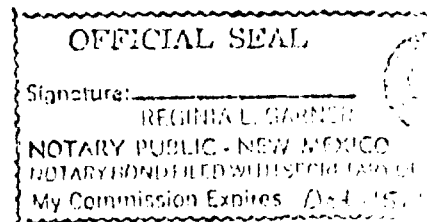
Very truly yours,

B. N. Muncy Jr.  
Secretary

STATE OF NEW MEXICO  
COUNTY OF EDDY

§  
§

The foregoing was acknowledged before me this 21st day of September, 1984.





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

RECEIVED BY  
 OCT 23 1984  
 O. C. D.  
 ARTESIA, OFFICE

Form C-103  
 Revised 1

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U.S.O.S.		
LAND OFFICE		
OPERATOR	<input checked="" type="checkbox"/>	

5a. Indicate Type of Lease  
 State  Fee  
 5. State Oil & Gas Lease No.  
 B-7596

SUNDRY NOTICES AND REPORTS ON WELLS  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
 USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL  OTHER   
 Name of Operator  
 J.E.M. Resources Inc. ✓  
 Address of Operator  
 P.O. Box 2938, Ruidoso NM. 88345  
 Location  
 2310 FEET FROM THE South LINE AND 330 FEET FROM East LINE, SECTION 5 TOWNSHIP 17 S RANGE 29 E NMPM.

7. Unit Agreement Name  
 8. Part of Lease Name  
 Red Twelve State  
 9. Well No.  
 3  
 10. Field and Pool, or Well Name  
 Cave GB/SA

15. Elevation (Show whether DF, RT, GR, etc.)  
 3603 Gr.

12. County  
 Eddy

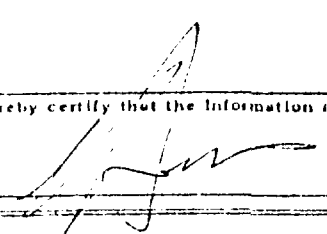
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

- |  |   |  |   |
|--|---|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                         | ALTERING CASING <input type="checkbox"/>      |
| TEMPERARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>               | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  |   | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> |   |
|  |   | OTHER <input type="checkbox"/>                                 |   |

16. Date Reported or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting or completion of operations.)  
 SEE RULE 1103.

- 9/13/84 Run 3550 ft. 5 1/2 17# csng cmt w/ 850 sxs Lite IV PD @ 4:30 AM Cir 35 sxs to pit. woc 18 Hrs.
- 9/26/84 RUPU Pressure test csng to 1000# held 30 min no drop Perf 3004-3434 w 37 .36 cal shots acid w/ 5500 gal 15% HCL inj 6 bpm @ 3000# swab well back
- 10/3/84 Frac 3004-3434 w/ 130,000 gal gel wtr & 243,000# 20/40 sd inj 103 bpm @ 3000# ISDP 1100# 15 min 950#
- 10/4/84 Flow well back
- 10/6/84 Install pumping unit.

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

SIGNED  TITLE Geologist DATE 10/23/84

Original Signed By  
 Leslie A. Clements  
 Geologist

DATE 001

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

SEP 14 1984

O. C. D.  
ARTESIA, OFFICE

Form O-17  
1-1-84

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FIELD OFFICE		
OPERATION	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

2. Name of Operator

J.E.M. Resources Inc.

3. Address of Operator

P.O. Box 2938, Ruidoso NM. 88345

4. Location of Well

UNIT LETTER I 2310 FEET FROM THE South LINE AND 330 FEET FROM  
East THE 5 LINE, SECTION 17 S TOWNSHIP 29 E RANGE 5 NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3603 Gr.

5a. Indicate Type of Well

State

5. State Oil & Gas Lease #

B-7586

7. Unit Agreement Name

8. Farm or Lease Name

Red Twelve State

9. Well No.

3

10. Field and Pool, or Will of

Cave GB/SA

12. County

Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER

PLUG AND ABANDON   
CHANGE PLANS   
OTHER

REMEDIAL WORK   
COMMENCE DRILLING OPNS.   
CASING TEST AND CEMENT JOBS   
OTHER

ALTERING CASING   
PLUG AND ABANDON

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

9/5/84 Spud 12 1/4" hole at 12:30 PM  
TD 350 Ft. Run 350 Ft. 24# 8 5/8" Csngr.  
CMT w/ 350 Sxs Class C 2% CaCl2 Plug down @ 8:30PM Cir 35 SXS to pit  
WOC 18 Hrs.

9/6/84 Pressure test Csngr to 500# Held 30 Min. no drop.  
Drill out w/ 7 7/8" bit

9/12/84 TD 3550 Run Dresser CNL/FDC DLL. Prep to run Production csngr.

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

SIGNED

TITLE Geologist

DATE 9/13/84

APPROVED BY

TITLE

DATE

Original Signed By  
Leslie A. Clements

SEP 17 1984

COUNTY EDDY FILED Cave STATE NM  
 OPR JFM RESOURCES API 30-015-24989  
 NO 3 LEASE Red Twelve State MAP  
 Sec 5, T17S, R29E CO-ORD  
 2310 FSL, 330 FEL of Sec 1-3-9 NM  
 7 mi NW/LoCo Hills SPL 9-5-84 CMP 11-28-84

CSG	WELL CLASS: INIT D FIN DO LSE CODE			
	FORMATION	DATUM	FORMATION	DATUM
8 5/8-350-350 sx				
5 1/2-3550-850 sx				
2 5/8-3450				
	ID 3550 (SADR)		PBD 3528	

IP (San Andres) Perfs 3004-3434 P 60 BOPD + 250 BW. Pot based on 24 hr test. GOR 3333; gty (NR)

FORM LA RUC #1 OPRSELFV 3603 GR SECS 6

F.R. 9-10-84  
 PD 3400 RT (San Andres)  
 1-19-85 AMEND ZONE: Formerly (Grayburg-San Andres)  
 9-18-84 TD 3550; WOCT  
 No Cores or DST's  
 1-13-85 TD 3550; PBD 3528; Complete  
 Perf (San Andres) 3004-3434 w/37 shots  
 Acid (3004-3434) 5500 gals (15% HCL)  
 Frac (3004-3434) 130,000 gals gel wtr +  
 243,000# sd  
 LOG TOPS: Salt 295, Base Salt 660, Seven  
 Rivers 1000, Queen 1635, Grayburg 2004,  
 San Andres 2382  
 LOGS RUN: CNL, FDC, DLI.  
 Rig Released 9-13-84  
 1-19-85 COMPLETION ISSUED 1-3-9 NM  
 IC 30-015-70300-84

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SEP 04 1984  
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ARTESIA, OFFICE

30-015-24980  
Form C-101  
Revised 10-1-78

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APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

a. Type of Work

b. Type of Well  
 DRILL  DEEPEN  PLUG BACK   
 OIL WELL  GAS WELL  OTHER  SINGLE ZONE  MULTIPLE ZONE

c. Name of Operator  
 J.E.M. Resources Inc. ✓

d. Address of Operator  
 P.O. Box 2938, Ruidoso NM. 88345

e. Location of Well  
 UNIT LETTER I LOCATED 2310 FEET FROM THE South LINE  
 AND 330 FEET FROM THE East LINE OF SEC. 5 TWP. 17 S RGE. 29 E NMPM

5A. Indicate Type of Lease  
 STATE  FEDERAL

6. State Oil & Gas Commission  
P

7. Unit Agreement Name

8. Farm or Lease Name  
 Red Twelve State

9. Well No.  
 3

10. Field and Pool, or Wildcat  
 Cave GB/SA

11. County  
 Eddy

18. Elevations (show whether DF, KI, etc.) 3603 6-R	21A. Kind & Status Plug. Bond Blanket	19. Proposed Depth 3400	19A. Formation San Andres	20. Method of Drilling Rotary
		21B. Drilling Contractor L&M	22. Approx. Date Work will start ASAP	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. COST
12 1/4	8 5/8	24	±350	250	Circumferential
7 7/8	5 1/2	15.5	3400	650	Circumferential

Mud Program: Fresh water and spud mud surface to 350 ft.  
 Brine water w/gel 350 to 3400

BOP will be installed on 8 5/8" csng

APPROVAL VALID FOR 180 DAYS  
 PERMIT EXPIRES 3-1-79  
 UNLESS DRILLING UNDERWAY

PLEASE DESCRIBE PROPOSED PROGRAM IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED ZONE. GIVE SHUT-IN PREVENTER PROGRAM, IF ANY.

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

Signed [Signature] Title Geologist Date 9/4/84

(This space for State Use)

APPROVED BY [Signature] TITLE Geologist DATE 9/4/84

All distances must be from the outer boundaries of the Section.

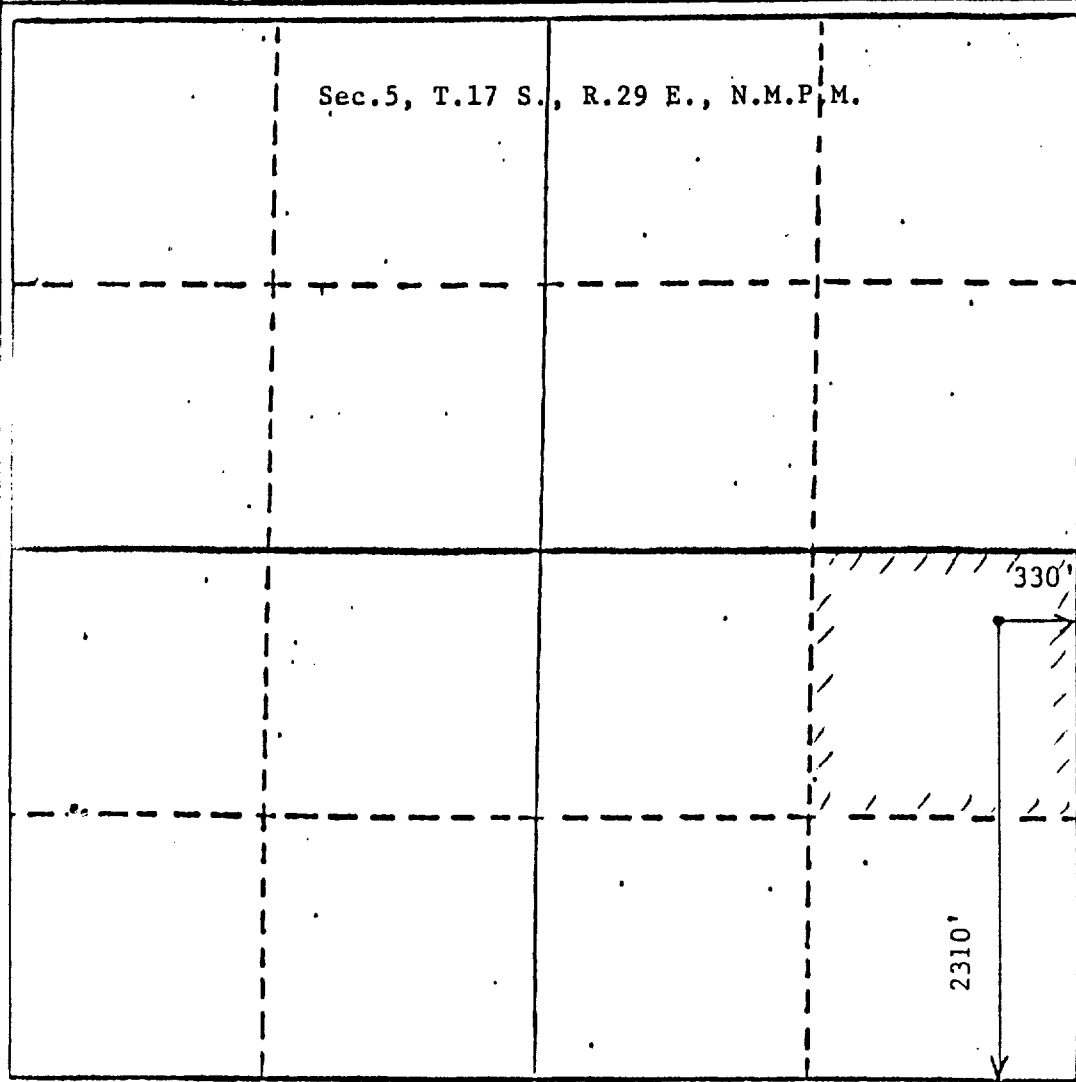
Operator J.E.M. Resources			Lease Red Twelve State		Well No.
Unit Letter I	Section 5	Township 17 South	Range 29 East	County Eddy	
Actual Footage Location of Well 2310 feet from the South line and 330 feet from the East line					
Ground Level Elev. 3603'	Producing Formation G-B/S-A		Pool CRUDE G-B/S-A		Dedicated Acreage .42

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes  No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, force-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the \_\_\_\_\_



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

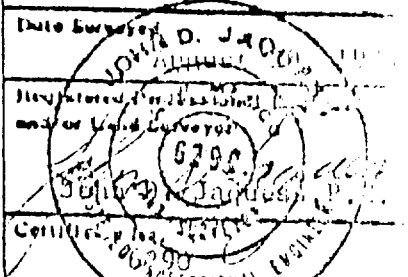
Name  
*Raymond L. ...*

Position  
*Geologist*

Company  
*The ...*

Date  
*9/4/54*

I hereby certify that the well location shown on this plat was plotted from the notes of actual surveys made by me under my supervision, and that the same is true and correct to the best of my knowledge and belief.



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DEC 28 1984 P. O. BOX 2088  
 SANTA FE, NEW MEXICO 87501

O. C. D.  
 WELL COMPLETION OR RECOMPLETION REPORT AND LOG

Type of Lease

5. State Oil & Gas Lease No.  
 E-10163

7. Unit Agreement Name

8. Farm or Lease Name

Red Twelve State

9. Well No.

6

10. Field and Pool, or MBL

Cave GB/SA

12. County

Eddy

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TYPE OF WELL

TYPE OF COMPLETION  
 OIL WELL  GAS WELL  DRY  OTHER \_\_\_\_\_

NEW  WORK OVER  DEEPEN  PLUG BACK  DIFF. RESV.  OTHER \_\_\_\_\_

Operator

J.E.M. Resources Inc. ✓

Address of Operator

P.O. Box 2938 Ruidoso, N.M. 88345

Location of Well

LETTER K LOCATED 2310 FEET FROM THE South LINE AND 1650 FEET FROM

SECTION OF SEC. 5 TWP. 17S RGE. 29E NMPM

16. Date Spudded 10-12-84 16. Date T.D. Reached 10-19-84 17. Date Compl. (Ready to Prod.) 11-2-84 18. Elevations (DF, RKB, RT, GR, etc.) 3636 GR 19. Elev. Casinghead 3638

20. Total Depth 3000 21. Plug Back T.D. 3582 3492 22. If Multiple Compl., How Many \_\_\_\_\_ 23. Intervals Drilled By \_\_\_\_\_ Rotary Tools all Cable Tools \_\_\_\_\_

Producing Interval(s), of this completion - Top, Bottom, Name

3006-3485 San Andres

25. Was Directional Made

NO

Type Electric and Other Logs Run

CNL/FDC D11

27. Was Well Cored

NO

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	348	12 1/2	350 sxs	none
5 1/2	17#	3589	7 7/8	1000 sxs	none

LINER RECORD

30. TUBING RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKING
					2 5/8	3492	free

Perforation Record (Interval, size and number)

3006-3485 35 0.42 cal

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
<u>3006-3485</u>	<u>5000 gal 15% HCL</u>
	<u>108,000 gal gel wtr.</u>
	<u>66,200# 20/40 sd</u>

PRODUCTION

First Production <u>10-9-84</u>	Production Method (Flowing, gas lift, pumping - Size and type pump) <u>Pump</u>	Well Status (Prod. or Shut-in) <u>Prod.</u>					
Date of Test <u>10-20-84</u>	Hours Tested <u>24</u>	Choke Size <u>7/8</u>	Prod'n. For Test Period	Oil - Bbl. <u>15</u>	Gas - MCF <u>150</u>	Water - Bbl. <u>300</u>	Gas - Oil Ratio <u>10:1</u>
Flowing Tubing Press. <u>( )</u>	Casing Pressure <u>5#</u>	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Comp)	
Disposition of Gas (Sold, used for fuel, vented, etc.) <u>sold</u>						Test Witnessed By	

Attachments

Deviation Survey

I certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of a deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all data obtained, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, the true depth also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed with the appropriate District Office of the Division, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt <u>285</u>	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Salt <u>648</u>	T. Aloka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers <u>1061</u>	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen <u>1620</u>	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg <u>2018</u>	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>2376</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinbry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Casco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....	No. 4, from.....to.....
No. 2, from.....to.....	No. 5, from.....to.....
No. 3, from.....to.....	No. 6, from.....to.....

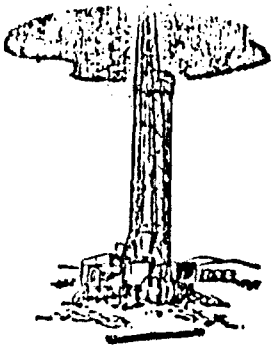
IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....	feet.....
No. 2, from.....to.....	feet.....
No. 3, from.....to.....	feet.....
No. 4, from.....to.....	feet.....

FORMATION RECORD (Attach additional sheets if necessary)

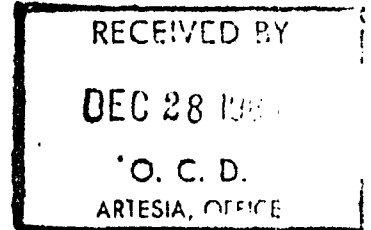
From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
	285	285	Red clay + calchie				
	648	363	Salt				
	1620	1022	AnHy + Dolomite				
	2018	398	Red sand + AnHy.				
	2376	358	Dolo + sand				
	3600	1224	Dolomite				



**LaRue Drilling Co., Inc. — Oil Well Drilling Contractors**

P. O. BOX 432X  
470 ARTESIA, NEW MEXICO

October 31, 1984



JEM Resources  
PO Box 2938  
Ruidoso, NM 88345

Re: Red Twelve State #6  
2310' FSL & 1650' FWL  
Sec. 5, T17S, R29E  
Eddy County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above captioned well.

DEPTH	DEVIATION
353'	1/4°
546'	1/4°
1091'	1/2°
1636'	3/4°
2146'	3/4°
2560'	1/4°
3079'	1/2°
3406'	1/2°
3600'	1/2°

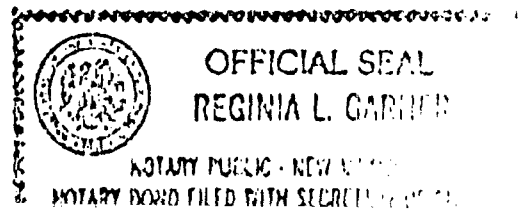
Very truly yours,

B. N. Muecy Jr.  
Secretary

BNM/rlg

STATE OF NEW MEXICO §  
COUNTY OF EDDY §

The foregoing was acknowledged before me this 31st day of October, 1984.

  
NOTARY PUBLIC



OIL CONSERVATION DIVISION

NO. OF COPIES RECEIVED		
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SANTA FE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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LAND OFFICE	<input type="checkbox"/>	<input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>	<input type="checkbox"/>

RECEIVED BY  
 P.O. BOX 2938  
 SANTA FE, NEW MEXICO 87501  
**DEC 17 1984**  
 O. C. D.  
 ARTESIA, OFFICE

5a. Indicate Type of Lease  
 State    
 5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

Name of Operator  
**J.E.M. Resources Inc.** ✓

Address of Operator  
**P.O. Box 2938 Ruidoso, N.M. 88345**

Location of Well  
 UNIT LETTER **K** **2310** FEET FROM THE **South** LINE AND **1650** FEET FROM  
 THE **West** LINE, SECTION **5** TOWNSHIP **17 S** RANGE **29E** NMPM.

7. Unit Agreement No.

8. Farm or Lease Name  
**Red Twelve State**

9. Well No.  
**6**

10. Field and Pool, or Wildcat  
**Cave GB/SA**

15. Elevation (Show whether DF, RT, GR, etc.)  
**3636 GR**

12. County  
**EDDY**

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

REMEDIAL WORK   
 PLUG AND ABANDON   
 COMMENCE DRILLING OPERATIONS   
 CASING TEST AND CEMENT JOBS   
 OTHER

ALTERING CASING   
 PLUG AND ABANDON   
 OTHER **Perf Frac.**

17. Describe the Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 10-21-84 Run 3589' 17# 5 1/2" csng cmt w/ 1000 sxs Dowell Light weight 4 Class "C" Plug down @ 2:00 PM woc 18 hrs.
- 10-22-84 Released rig
- 10-30-84 Pressur test csng to 1000# held 30 min Perf 3006-3485 w/35 .42 cal shots Acid w/ 5000 gal 15% HCL ing 5 BPM @ 2400#.
- 11-84 Frac w/ 108,000 gal gel wtr + 66,200# 20/40 sd INJ 83 3400# ISDP 1400# 15 min 800#

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

SIGNED: \_\_\_\_\_ TITLE **Geologist** DATE **12-14-84**

Original Signed By  
**Leslie A. Clements**  
 Supervisor District II

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

Form O-  
Revised

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U.S.G.S.	
LAND OFFICE	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG OR TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM E-10) FOR SUCH PROPOSALS.)

1.  OIL WELL     GAS WELL    OTHER- \_\_\_\_\_

Operator: **Resources Inc.** ✓  
Address: **Box 2938, Ruidoso NM. 88345**

UNIT LETTER **K**    **2310** FEET FROM THE **South** LINE AND **1650ft** FEET FROM THE **West** LINE, SECTION **5** TOWNSHIP **17 S** RANGE **29 E** NMPM.

**RECEIVED BY**  
**OCT 22 1984**  
**O. C. D.**  
**ARTESIA OFFICE**

7. Unit Agreement Name

8. Farm or Lease Name  
**Red Twelve**

9. Well No.  
**6**

10. Field and Pool, or Willing  
**Cave GB/SA**

15. Elevation (Show whether DF, RT, GR, etc.)  
**3636 Gr.**

12. County  
**Eddy**

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 10/12/84 Spud 12 1/4" hole @ 1:40 PM Drill to 353 Ft. Run 348 Ft. 8 5/8" 24# csng cmt W/ 350 sxs Class "C" 2% CaCl2 cir 30 sxs to pit WOC 18 Hrs.
- 10/13/84 Pressure test csng to 600# held 30 min no drop Drill out W/ 7 7/8" bit
- 10/19/48 TD 3600' Prep to run E logs
- 10/20/84 Run Gearhart CNL/FDC, DLL/RXO
- 10/21/84 Prep to run production csng

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

TITLE **Geologist** DATE **10/22/84**

Original Signed By  
**Leslie A. Clements**  
Supervisor District #

DATE **OCT 22 1984**

COUNTY EDDY FIELD Cave STATE NM  
 OPR JEM RESOURCES API 30-015-25055  
 NO 6 LEASE Red Twelve State MAP  
Sec 5, T17S, R29E CO-ORD  
2310 FSL, 1650 FWL of Sec 1-3-11 NM  
7 mi NW/Loco Hills SPD 10-12-84CMP 12-20-84

CSC	WELL CLASS: INIT D FIN DO LSE. CODE			
	FORMATION	DATUM	FORMATION	DATUM
8 5/8-348-350 sx				
5 1/2-3589-1000 sx				
2 5/8-3492				
	TD 3600 (SADR)		PBD 3492	

IP (San Andres) Perfs 3006-3485 P 15 BOPD + 300 BW. Pot based on 24 hr test. GOR 10,000; gty (NR)

CONTR LaRue #1 OPRSLIV 3636 GR SUBS 6

F.R. 10-22-84  
 PD 3500 RT (San Andres)  
 1-19-85 AMEND ZONE: Formerly (Grayburg-San Andres)  
 10-23-84 TD 3600; Prep MORT  
 No Cores or DST's  
 11-1-84 TD 3600; WOCT  
 1-14-85 TD 3600; PBD 3492; Complete  
 Perf (San Andres) 3006-3485 w/35 shots  
 Acid (3006-3485) 5000 gals (15% HCL)  
 Frac (3006-3485) 108,000 gals gel wtr +  
 66,200# sd  
 LOG TOPS: Salt 285, Base Salt 648, Seven  
 Rivers 1061, Queen 1620, Grayburg 2018,  
 San Andres 2376  
 LOGS RUN: CNL, FDC, DLL  
 Rig Released 10-20-84  
 1-19-85 COMPELTION ISSUED  
 1-3-11 NM  
 IC 30-015-70373-84

COPIES RECEIVED	
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DATE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

RECEIVED BY  
OCT 11 1984  
O. C. D.  
ARTESIA, OFFICE

SANTA FE, NEW MEXICO 87501

5A. Indicate Type of Lease  
STATE    
5. State Oil & Gas

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1. Type of Work  
 a. Type of Well  
 DRILL  DEEPEN  PLUG BACK   
 OIL WELL  GAS WELL  OTHER  SINGLE ZONE  MULTIPLE ZONE

2. Name of Operator  
 J.E.M. Resources Inc.

3. Address of Operator  
 P.O. Box 2938, Ruidoso NM. 88345

4. Name of Well  
 UNIT LETTER K LOCATED 2310 FEET FROM THE South LINE  
1500 FEET FROM THE West LINE OF SEC. 5 TWP. 17 S RGE. 29 E NMPM

7. Unit Agreement Name

8. Farm or Lease Name  
 Red Twelve State

9. Well No.  
 6

10. Field and Pool, or Wildcat  
 Cave GB/SA

12. County  
 Eddy

19. Proposed Depth  
 3500

19A. Formation  
 San Andres

20. Rotary or C.T.  
 Rotary

21. Elevations (Show whether D.F., K.T., etc.)  
3636 6R

21A. Kind & Status Plug. bond  
 Blanket

21B. Drilling Contractor  
 L & M

22. Approx. Date Work will start  
 ASAP

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/8	8 5/8	24	± 350	250	circulate
11 7/8	5 1/2	15.5	3500	750	circulate

Mud Program: Fresh water 0-350  
 Brine water with gel 350-3500

BOP: BOP will be installed on 8 5/8" csng and tested to 3000#

APPROVAL VALID FOR 180 DAYS  
 PERMIT EXPIRES 4-12-85  
 UNLESS DRILLING UNDERWAY

ABOVE SPACE DESCRIBE PROPOSED PROGRAM IF PROPOSAL IS TO DEEPEN OR PLUG BACK. GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed [Signature] Title Geologist Date 10/9/84

(This space for State Use)

Original Signed By  
 Mike Williams  
 Oil & Gas Inspector

OCT 15 1984

APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

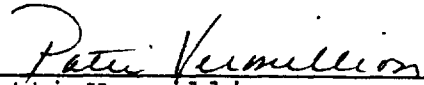
CONDITIONS OF APPROVAL, IF ANY:



Grazing Lessee: Bogle Farms, Inc.  
P. O. Drawer 460  
Dexter, New Mexico 88230


Offset Operators: Conoco, Inc.  
P. O. Box 1959  
Midland, Texas 79702

Kincaid & Watson  
P. O. Box 498  
Artesia, New Mexico 88210

  
\_\_\_\_\_  
Patti Vermillion

SUBSCRIBED AND SWORN TO before me this 7th day of  
August, 1986.

My commission expires:  
11-3-88

  
\_\_\_\_\_  
Notary Public

August 7, 1986

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Kincaid & Watson  
P. O. Box 498  
Artesia, New Mexico 88210

Re: Red Twelve State No. 4 Well  
Township 17 South, Range 29 East, NMPM  
Section 5: 990 FSL and 2310 FEL  
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of Form C-108, Application of Frostman Oil Corporation for Authority to Inject.

The name, address, phone number and contact party for the applicant is:

Frostman Oil Corporation  
P. O. Drawer W  
Artesia, New Mexico 88210  
Attention: Clarence Forister  
(505) 746-3344

The intended purpose of the injection well, located 990 feet from the south line and 2,310 feet from the east line of Section 5, Township 17 South, Range 29 East, N.M.P.M., is for the disposal of water into the San Andres formation. The expected maximum injection rate is 900 barrels per day, with the average injection pressure to be 0 to 600 PSIG.

Kincaid & Watson  
-2-

August 7, 1986

Surface owners or offset operators must file any objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico, 87501, within 15 days from the date hereof.

Please contact the undersigned or Mr. Forister at the above address if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER





Chad Dickerson

CD:pv  
Enclosure

cc: Mr. Clarence Forister

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 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. <input type="checkbox"/> Show to whom, date and address of delivery.	
2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: Kincaid & Watson PO Box 498 Aptasia, NM 88210	
4. Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail	Article Number P 241 349 804
Always obtain signature of addressee <u>or</u> agent and DATE DELIVERED.	
5. Signature - Addressee X 	
6. Signature - Agent X 	
7. Date of Delivery 8-11-86	
8. Addressee's Address (ONLY if requested and fee paid)	



August 7, 1986

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Commissioner of Public Lands  
State of New Mexico  
P. O. Box 1148  
Santa Fe, New Mexico 87504-1148

Re: Red Twelve State No. 4 Well  
Township 17 South, Range 29 East, NMPM  
Section 5: 990 FSL and 2310 FEL  
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of Form C-108, Application of Frostman Oil Corporation for Authority to Inject.

The name, address, phone number and contact party for the applicant is:

Frostman Oil Corporation  
P. O. Drawer W  
Artesia, New Mexico 88210  
Attention: Clarence Forister  
(505) 746-3344

The intended purpose of the injection well, located 990 feet from the south line and 2,310 feet from the east line of Section 5, Township 17 South, Range 29 East, N.M.P.M., is for the disposal of water into the San Andres formation. The expected maximum injection rate is 900 barrels per day, with the average injection pressure to be 0 to 600 PSIG.

Surface owners or offset operators must file any objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico, 87501, within 15 days from the date hereof.

Please contact the undersigned or Mr. Forister at the above address if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER

Chad Dickerson

CD:pv  
Enclosure

cc: Mr. Clarence Forister

<p>● <b>SENDER: Complete items 1, 2, 3 and 4.</b> 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.</p>	
1. <input type="checkbox"/> Show to whom, date and address of delivery.	
2. <input type="checkbox"/> Restricted Delivery.	
<p>3. Article Addressed to: Commissioner of Public Lands State of New Mexico PO Box 1148 Santa Fe, NM 87504-1148</p>	
4. Type of Service:	Article Number
<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured <input type="checkbox"/> COD P 241 349 805
<p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>	
5. Signature - Addressee	<i>[Handwritten Signature]</i>
6. Signature - Agent	<i>[Handwritten Signature]</i>
7. Date of Delivery	5 AUG 1986
<p>8. Addressee's Address (ONLY if requested and fee paid)</p>	

August 7, 1986

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Bogle Farms, Inc.  
P. O. Drawer 460  
Dexter, New Mexico 88230

Re: Red Twelve State No. 4 Well  
Township 17 South, Range 29 East, NMPM  
Section 5: 990 FSL and 2310 FEL  
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of Form C-108, Application of Frostman Oil Corporation for Authority to Inject.

The name, address, phone number and contact party for the applicant is:

Frostman Oil Corporation  
P. O. Drawer W  
Artesia, New Mexico 88210  
Attention: Clarence Forister  
(505) 746-3344

The intended purpose of the injection well, located 990 feet from the south line and 2,310 feet from the east line of Section 5, Township 17 South, Range 29 East, N.M.P.M., is for the disposal of water into the San Andres formation. The expected maximum injection rate is 900 barrels per day, with the average injection pressure to be 0 to 600 PSIG.

Bogle Farms, Inc.  
-2-

August 7, 1986

Surface owners or offset operators must file any objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico, 87501, within 15 days from the date hereof.

Please contact the undersigned or Mr. Forister at the above address if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER



Chad Dickerson

CD:pv  
Enclosure

cc: Mr. Clarence Forister

PS Form 3811, July 1983 447-945

DOMESTIC RETURN RECEIPT

<b>SENDER: Complete items 1, 2, 3 and 4.</b> Put your address in the "RETURN TO" space on the reverse side. Failure to do so 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. <input type="checkbox"/> Show to whom, date and address of delivery.	
2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: Bogle Farms Inc PO Drawer 460 Dexter, NM 88230	
4. Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail	Article Number P 241 349 806
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X <i>Miss Salas</i>	
6. Signature - Agent X	
7. Date of Delivery X 8-8-86	
8. Addressee's Address (ONLY if requested and fee paid)	

August 7, 1986

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Conoco, Inc.  
P. O. Box 1959  
Midland, Texas 79702

Re: Red Twelve State No. 4 Well  
Township 17 South, Range 29 East, NMPM  
Section 5: 990 FSL and 2310 FEL  
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of Form C-108, Application of Frostman Oil Corporation for Authority to Inject.

The name, address, phone number and contact party for the applicant is:

Frostman Oil Corporation  
P. O. Drawer W  
Artesia, New Mexico 88210  
Attention: Clarence Forister  
(505) 746-3344

The intended purpose of the injection well, located 990 feet from the south line and 2,310 feet from the east line of Section 5, Township 17 South, Range 29 East, N.M.P.M., is for the disposal of water into the San Andres formation. The expected maximum injection rate is 900 barrels per day, with the average injection pressure to be 0 to 600 PSIG.

Conoco, Inc.

-2-

August 7, 1986

Surface owners or offset operators must file any objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico, 87501, within 15 days from the date hereof.

Please contact the undersigned or Mr. Forister at the above address if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER

Chad Dickerson

CD:pv  
Enclosure

cc: Mr. Clarence Forister

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 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:  
 CONOCO INC  
 PO Box 1959  
 Midland, TX 79702

4. Type of Service: Article Number  
 Registered  Insured P 241 329 807  
 Certified  COD  
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
 X

6. Signature - Agent  
 X

7.  Registered Mail  
 Registered Mail - Restricted Delivery

8.  Registered Mail - Restricted Delivery

MIDLAND, TX  
 AUG 11 1986  
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