



Texaco USA

P O Box 728  
Hobbs NM 88240  
505 393 7191

*Case 9279*

November 2, 1987

State of New Mexico  
Energy & Minerals Department  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501-2088

Attention: Mr. Michael Stogner

RE: Non-Standard Gas Proration Unit  
Federal USA "C" Well No. 2  
Unit Letter I, Sec. 15, T-17-S, R-32-E  
Lea County, New Mexico

Gentlemen:

Texaco Inc. respectfully requests that an 80-acre non-standard gas proration unit be approved for the referenced well. The well will be completed in the Maljamar Queen (Gas) pay zone. Form C-102 is attached showing the proposed 80-acre proration unit which consists of the E/2 SE/4.

Attached also is a plat of the lease and a list of Offset Operators that have been notified of this request by a copy of this letter.

Yours very truly,

L. J. Seeman  
District Petroleum Engineer

LDR:JRB

Attachments

cc: NMOCD - Hobbs  
BLM - Carlsbad  
Offset Operators  
(Address List Attached)

FEDERAL USA "C" LEASE  
OFFSET OPERATORS

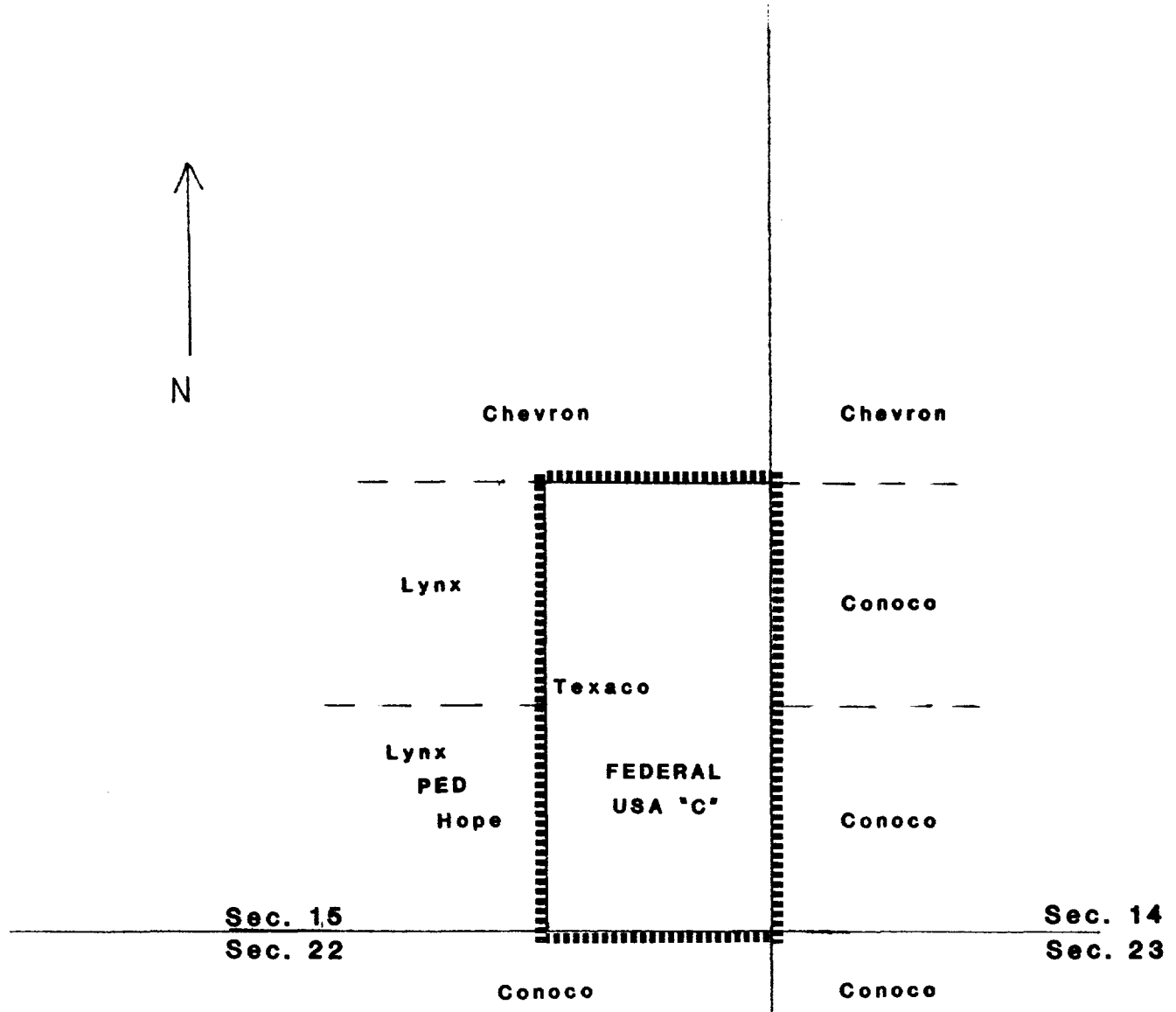
Chevron U.S.A. Inc.  
P. O. Box 670  
Hobbs, New Mexico 88240

Conoco Inc.  
Box 460  
Hobbs, New Mexico 88240

Hope Oil Inc.  
Box 953  
Midland, Texas 79702

Lynx Petroleum  
Box 1666  
Hobbs, New Mexico 88241

Ped Oil Corporation  
P. O. Drawer 3547  
Midland, Texas 79702



2 miles South of  
Maljamar, New Mexico

TEXACO INC.  
Federal U. S. A. "C"  
Section 15, T-17-S, R-32-E  
Lea County, New Mexico  
Scale: 1" = 1000'

Case 9279

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-080258
b. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Texaco Inc.		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240		8. FARM OR LEASE NAME Federal USA "C"
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)* At surface 1650' FSL & 660' FEL (Unit Letter I) At proposed prod. zone Same		9. WELL NO. 2
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 2 Miles Southeast of Maljamar, New Mexico		10. FIELD AND POOL, OR WILDCAT Maljamar-Queen Gas
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 660'	16. NO. OF ACRES IN LEASE 80	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 15, T-17-S, R-32-E
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 3810' PBDT	17. NO. OF ACRES ASSIGNED TO THIS WELL 80	12. COUNTY OR PARISH Lea
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 4033' DF	19. PROPOSED DEPTH 3810' PBDT	13. STATE N.M.
23. PROPOSED CASING AND CEMENTING PROGRAM		20. ROTARY OR CABLE TOOLS Pulling Unit
		22. APPROX. DATE WORK WILL START* December 1, 1987

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	7-5/8"	24#	295'	200 (Circulated)
6-3/4"	4-1/2"	11.6#	4150'	650 (TOC @ 1530' by T.S.)

1. MIRU. Pull rods & pump. Install BOP. Pull tubing.
2. By wireline, run gauge ring to  $\pm$  3850'. POH. RIH w/4-1/2" CIBP & set @  $\pm$  3850'. Dump 40' cement on top CIBP.
3. Test casing to 1700 PSI. Squeeze any leaks.
4. Run GR-CCL from PBDT to 2000'.
5. GIH w/4-1/2" packer to  $\pm$  3220'. Spot 100 gallons 10% acetic acid from 3070'-3220'. Set packer @ 3000'.
6. Perf. Queen w/2 JSPF 3187'-96' & 3200'-08'. (38 Holes).
7. Acidize perfs w/2000 gallons 15% NEFE. Max. rate & press: 3 BPM, 4000, psi.
8. Swab back load. Evaluate for additional stimulation.
9. If necessary, sand-frac w/10,000 gallons 30# HPG gelled 2% KCL water and 16,000# 20/40 sand. SION.
10. Release packer. POH.
11. Run production equipment. Place on production to pump back load water.
12. After load water recovered, run BHP bombs. Run 4-point test on 72 Hr. pressure buildup test. Place back on production.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

34. SIGNED L. J. Seeman TITLE L. J. Seeman Dist. Petr. Engr. DATE November 2, 1987

(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_

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

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions On Reverse Side

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-102  
Revised 10-1

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

Operator <b>Texaco Inc.</b>		Lease <b>Federal U. S. A "C"</b>			Well No. <b>2</b>
Unit Letter <b>I</b>	Section <b>15</b>	Township <b>17-S</b>	Range <b>32-E</b>	County <b>Lea</b>	

Actual Postage Location of Well:  
**1650** feet from the **South** line and **660** feet from the **East** line

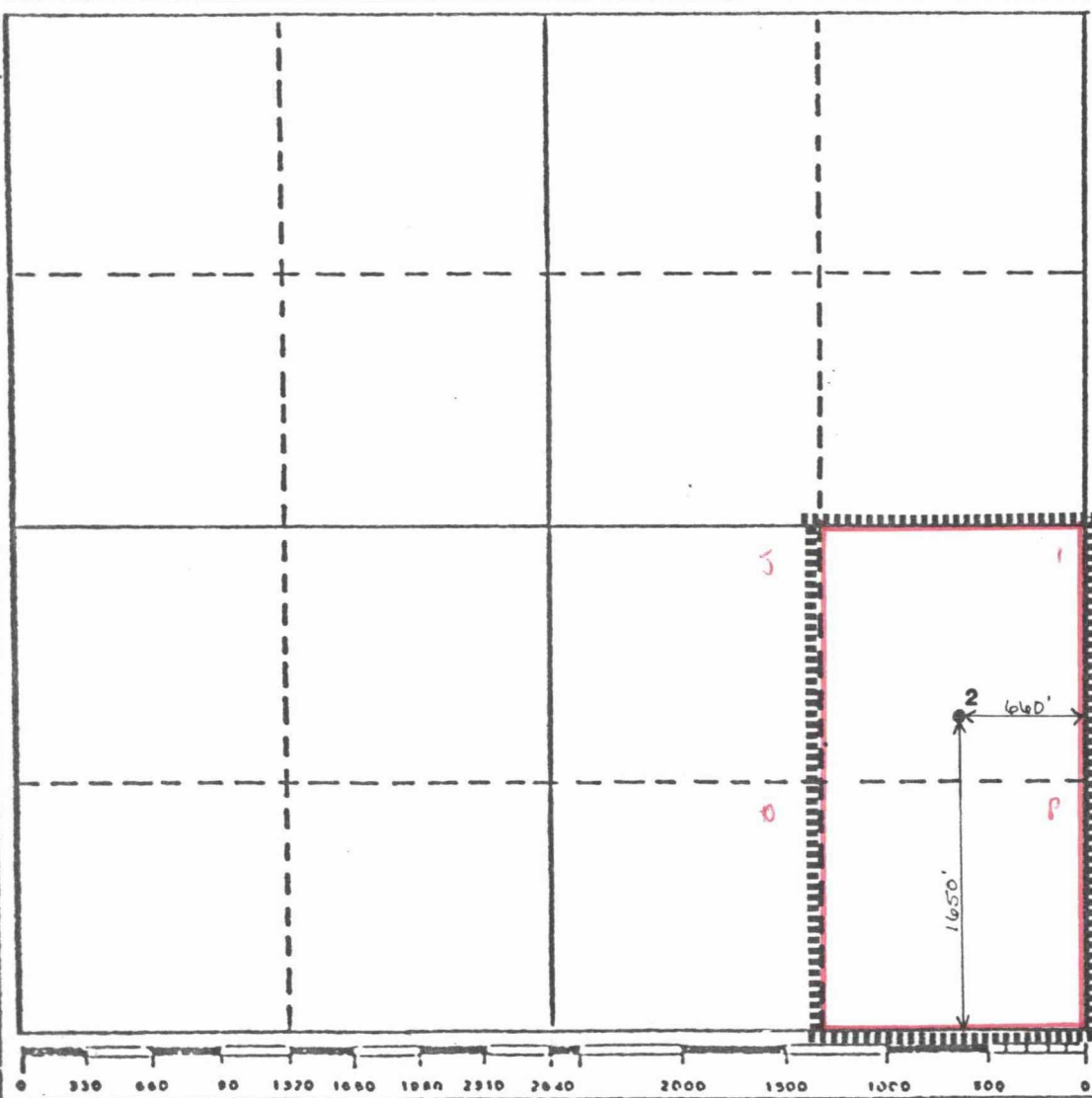
Ground Level Elev. <b>4033 DF</b>	Producing Formation <b>Queen</b>	Pool <b>Maljamar Queen Gas</b>	Dedicated Acreage: <b>80</b>	Acres
--------------------------------------	-------------------------------------	-----------------------------------	---------------------------------	-------

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 working 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 side of this form if necessary.) \_\_\_\_\_

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



CERTIFICATION

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

*L. J. Seeman*  
Name

L. J. Seeman  
Position  
Dist. Petr. Engr.

Company  
Texaco Inc.

Date  
November 2, 1987

I hereby certify that the well location shown on this plot was plotted from field 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.

Date Surveyed

Registered Professional Engineer and/or Land Surveyor

Certificate No.



P-562 874 908

P-562 874 909

DEPT FOR CERTIFIED MAIL

U.S.G.P.O. 153-506

Sheet and No  
**Box 953**

P.O. State and ZIP Code  
**Midland, TX 79702**

Postage

Delivery Fee

Special Delivery Fee

Return Receipt showing to whom and Date Delivered

Return Receipt showing to whom, Date and Address of Delivery

TOTAL Postage and Fees

Postmark or Date

**NOV 2 1987**

**1/84**

P-562 874 905

PS Form 3800 June 1985

Sheet and No  
**PO Drawer 3547**

P.O. State and ZIP Code  
**Midland, TX 79702**

Postage

Delivery Fee

Special Delivery Fee

Return Receipt showing to whom and Date Delivered

Return Receipt showing to whom, Date and Address of Delivery

TOTAL Postage and Fees

Postmark or Date

**NOV 2 1987**

**1/84**

P-562 874 907

U.S.G.P.O. 153-506

PS Form 3800 June 1985

Sheet and No  
**Box 460**

P.O. State and ZIP Code  
**Hobbs, NM 88240**

Postage

Delivery Fee

Special Delivery Fee

Return Receipt showing to whom and Date Delivered

Return Receipt showing to whom, Date and Address of Delivery

TOTAL Postage and Fees

Postmark or Date

**NOV 2 1987**

**1/84**

P-562 874 906

DEPT FOR CERTIFIED MAIL

Sheet and No  
**Chevron USA Inc**

P.O. State and ZIP Code  
**PO Box 670**

P.O. State and ZIP Code  
**Hobbs, NM 88240**

Postage

Delivery Fee

Special Delivery Fee

Return Receipt showing to whom and Date Delivered

Return Receipt showing to whom, Date and Address of Delivery

TOTAL Postage and Fees

Postmark or Date

**NOV 2 1987**

**1/84**

U.S.G.P.O. 153-506

PS Form 3800, June 1985