

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCB HOBS OCB

FEB 21 2013

APPLICATION FOR PERMIT TO DRILL OR REENTER

1a. Type of work: <input checked="" type="checkbox"/> DRILL <input type="checkbox"/> REENTER		RECEIVED	
1b. Type of Well: <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> Single Zone <input type="checkbox"/> Multiple Zone		6. If Indian, Allottee or Tribe Name N/A	
2. Name of Operator ConocoPhillips Company		7. If Unit or CA Agreement, Name and No. N/A	
3a. Address P.O. Box 51810 Midland, TX 79710-1810		8. Lease Name and Well No. Ruby Federal #59 <38653>	
3b. Phone No. (include area code) (432)688-6913		9. API Well No. 30225-41020	
4. Location of Well (Report location clearly and in accordance with any State requirements.)* At surface UL N, Sec. 18, T17S, R32E; 330' FSL & 1850' FWL At proposed prod. zone UL N, Sec. 18, T17S, R32E; 330' FSL & 1650' FWL		10. Field and Pool, or Exploratory Maljamar; Yeso West <244500>	
14. Distance in miles and direction from nearest town or post office* Approximately 3 miles south of Maljamar, New Mexico		11. Sec., T. R. M. or Blk and Survey or Area Sec. 18, T17S, R32E	
15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drig. unit line, if any) 330' FSL	16. No. of acres in lease 1601.96	17. Spacing Unit dedicated to this well 40	
18. Distance from proposed location* to nearest well, drilling, completed, applied for, on this lease, ft. Approximately 550'	19. Proposed Depth 6919' TVD/6925' MD	20. BLM/BIA Bond No. on file ES0085	
21. Elevations (Show whether DF, KDB, RT, GL, etc.) 3949' GL	22. Approximate date work will start* 03/01/2013	23. Estimated duration 20 days	

24. Attachments

The following, completed in accordance with the requirements of Onshore Oil and Gas Order No. 1, must be attached to this form:

- | | |
|--|---|
| 1. Well plat certified by a registered surveyor. | 4. Bond to cover the operations unless covered by an existing bond on file (see Item 20 above). |
| 2. A Drilling Plan. | 5. Operator certification |
| 3. A Surface Use Plan (if the location is on National Forest System Lands, the SUPO must be filed with the appropriate Forest Service Office). | 6. Such other site specific information and/or plans as may be required by the BLM. |

25. Signature <i>Susan B. Maunder</i>	Name (Printed/Typed) Susan B. Maunder	Date 11/16/12
Title Senior Regulatory Specialist		
Approved by (Signature) <i>Ts/ James A. Amos</i>	Name (Printed/Typed)	Date FEB 20 2013
Title FIELD MANAGER		

CARLSBAD FIELD OFFICE
APPROVAL FOR TWO YEARS

Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Conditions of approval, if any, are attached.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Continued on page 2)

*(Instructions on page 2)

Approval Subject to General Requirements
& Special Stipulations Attached

Roswell Controlled Water Basin

*K2
02/29/13*

SEE ATTACHED FOR
CONDITIONS OF APPROVAL
FEB 27 2013

12/11/2013 DATE IN	SUSPENSE	MAM ENGINEER	12/14/2013 LOGGED IN	NSL TYPE	PMAM1335045588 APP NO.
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ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
- Engineering Bureau -
1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
[DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
[PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
[WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
[SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
[EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]

- [A] Location - Spacing Unit - Simultaneous Dedication **Ruby Federal #59**
 NSL NSP SD

Check One Only for [B] or [C]

- [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM

- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR

- [D] Other: Specify _____

*Ruby Federal #59
API 30-025-41020
NSL*

[2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply

- [A] Working, Royalty or Overriding Royalty Interest Owners
[B] Offset Operators, Leaseholders or Surface Owner
[C] Application is One Which Requires Published Legal Notice
[D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
[E] For all of the above, Proof of Notification or Publication is Attached, and/or,
[F] Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Susan B. Maunder

Print or Type Name

Susan B. Maunder
Signature

Senior Regulatory Specialist

Title

12-6-13

Date

Susan.B.Maunder@conocophillips.com

e-mail Address

RECEIVED OGD

2013 DEC 11 P 2: 5b



Susan B. Maunder
Sr. Regulatory Specialist
Phone: (281) 206-5281

ConocoPhillips Company
600 N. Dairy Ashford Rd, Office P10-4-4054
Houston, TX 77079-1175

December 6, 2013

State of New Mexico
Oil Conservation Division
1220 South Saint Francis Drive
Santa Fe, New Mexico 87505

SUBJECT: REQUEST FOR NON-STANDARD LOCATION FOR RUBY FEDERAL #59 –
API 30-025-41020

Dear Sirs,

ConocoPhillips Company respectfully requests a non-standard location exception to produce the Ruby Federal #59 well. The lease is recorded as NM LC029405B The well located in UL N, 330' from the south line and 1850' from the west line of Section 18, Township 17S, Range 32E, Lea County, New Mexico. The bottom hole location is 298' from the south line and 1593' from the west line. The footages place the well closer than 330' from a Qtr/Qtr Section line. The table below details the ownership of adjacent spacing units in Section 18 and 19. ConocoPhillips is 100% lessee and 100% working interest owner of the Ruby federal lease.

Spacing Unit	Adjacent Units	# of Wells	Operator(s)
UL N	UL J, K, L, M, O; Sec. 18, 17S, 32E	8	ConocoPhillips Company
UL N	UL B, C, D; Sec. 19, 17S, 32E	8	COG Operating LLC

Enclosed are the following documents in support of this request.

- Administrative Application Checklist
- Copy of the New Mexico Form C-102
- Website Image of Ruby and Emerald Lease Boundary

A copy of this submittal is being sent to Bureau of Land Management, Carlsbad Field Office and COG Operating LLC via certified return receipt.

The granting of this exception will prevent waste and minimize surface disturbance.

If you have questions regarding this request, I can be reached at 281-206-5281 or via email at Susan.B.Maunder@conocophillips.com.

Sincerely,

Susan B. Maunder
Senior Regulatory Specialist
ConocoPhillips Company

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

HOBBS OCD State of New Mexico
Energy, Minerals & Natural Resources Department
OCT 21 2013 OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
RECEIVED

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office
 AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-41020	² Pool Code 44500	³ Pool Name MALJAMAR; YESO WEST
⁴ Property Code 38653	⁵ Property Name RUBY FEDERAL	
⁷ OGRID No. 217817	⁸ Operator Name ConocoPhillips Company	⁶ Well Number 59
⁹ Elevation 3949'		

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	18	17S	32E		330	SOUTH	1850	WEST	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	18	17S	32E		298	SOUTH	1593	WEST	LEA

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

¹⁶ 1850' 1593'	¹⁷ OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i> Signature: <u>Ashley Bergen</u> Date: <u>10/04/2013</u> Printed Name: <u>Ashley Bergen</u> E-mail Address: <u>ashley.bergen@cop.com</u>	
		¹⁸ SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i>
		Date of Survey Signature and Seal of Professional Surveyor: Certificate Number

BH

NOV 12 2013

Website Image of Ruby and Emerald Lease Boundary
With Approximate Well Location

U.S. DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

General Land Office Records

BLM



Search Documents

Reference Center

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Search Documents Results List LSR Details

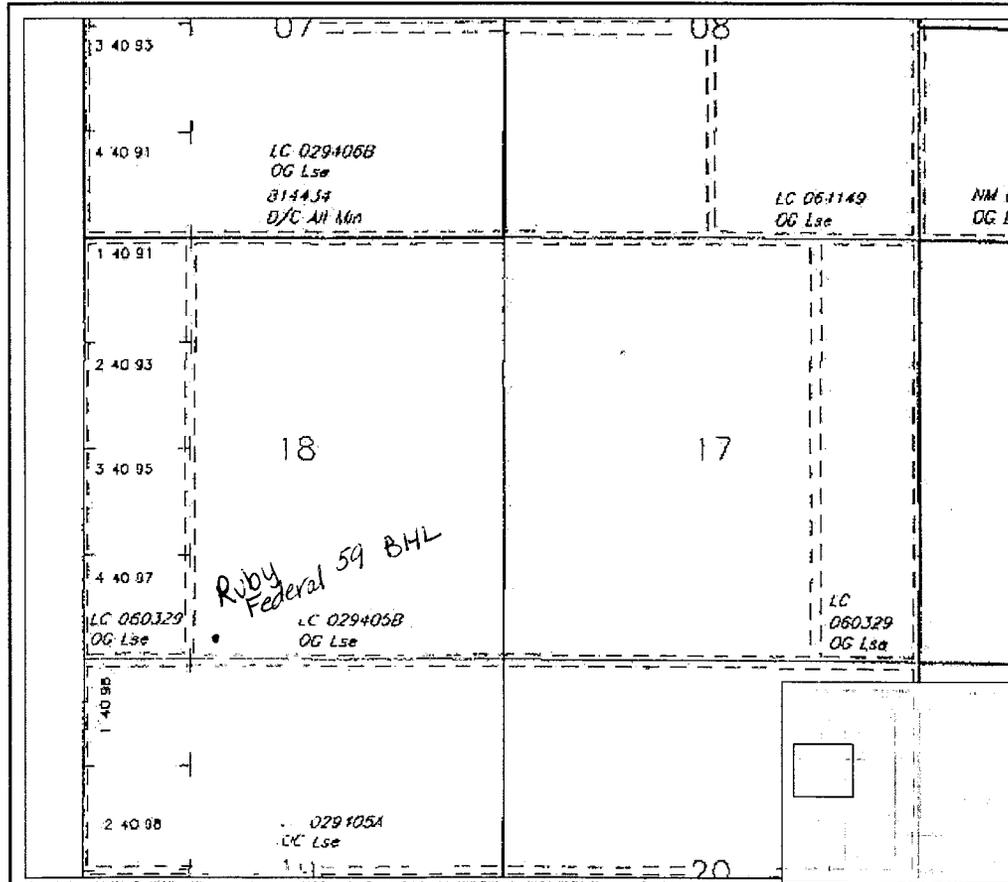
DM ID: 39839 Document Type: Oil and Gas State: New Mexico Posted Date: 8/7/2013

Land Status Record Details

Related Documents

Township / Range: 017.0S - 032.0E
Meridian: New Mexico Pm
State Office: New Mexico State Office
Pages: 1

Sheet: 1



50%

ZOOM VIEW

Javascript Viewer

Plugin Viewer

Basic Viewer

PDF

JP2



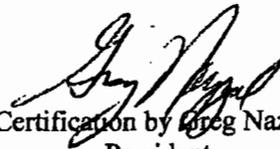
HOBBS OCD

OCT 21 2013

RECEIVED

1407 Northpark Dr.
Kingwood, TX 77339
Cell: (281) 851-8112
Efax: (281) 966-1566

BlueStar MWD, LP performed a MWD survey for ConocoPhillips' Ruby Federal 59, located in Lea Co., NM. The API number is: 30-025-41020. The surveys were taken from 795 MD to 6859 MD and ranged over the dates from 25-July-13 to 31-July-13 and are certified as being true and correct.


Certification by Greg Nazzari
President

Results of Directional Survey

API number:	30-025-41020		DD
OGRID:		Operator:	CONOCOPHILLIPS COMPANY
		Property:	RUBY FEDERAL # 59

surface	ULSTR:	N	18		T	17S		R	32E
						330	FSL		1850
									FWL

BH Loc	ULSTR:	N	18		T	17S		R	32E
6911	MD		6902.0	TVD		298	FSL		1593
									FWL

Top Perf/OH	ULSTR:	N	18		T	17S		R	32E
5372	MD		5366.8	TVD		302	FSL		1702
									FWL

Bot Perf/OH	ULSTR:	N	18		T	17S		R	32E
6570	MD		6561.8	TVD		297	FSL		1617
									FWL

	MD	N/S	E/W	VD
	5292	-28.02	-143.27	5287
TOP PERFS/OH	5372	-27.76	-148.39	5366.83
	5381	-27.73	-148.97	5375.81
	6545	-33.52	-231.05	6536.90
BOT PERFS/OH	6570	-33.50	-232.84	6561.84
	6635	-33.44	-237.49	6626.67

NEXT TO LAST	6859	-32.59	-253.13	6850.12
LAST READING	6911	-32.49	-256.66	6902.00
TD	6911	-32.49	-256.66	6902.00

Surface Location	330	FS	1850	FW
Projected BHL	298	FS	1593	FW
Location of				
Top Perfs/OH	302	FS	1702	FW
Bottom Perfs/OH	297	FS	1617	FW

SUMMARY of Subsurface Locations

Surface Location	N-18-17S-32E	330	FS	1850	FW	Vert. Depth
Top Perfs/OH	N-18-17S-32E	302	FS	1702	FW	5366.83
Bottom Perfs/OH	N-18-17S-32E	297	FS	1617	FW	6561.84
Projected TD	N-18-17S-32E	298	FS	1593	FW	6902.00

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Janet Smith</i>
1. Article Addressed to: COG Operating LLC One Concho Center 600 W. Illinois Ave. Midland, TX 79701 <i>Ruby Fed 59</i>	B. Received by (Printed Name) <i>Janet Smith</i> C. Date of Delivery <i>12/10/13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
2. Article Number (Transfer from service label)	3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
7002 3150 0001 5967 3355 PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Jessica Horner</i>
1. Article Addressed to: Bureau of Land Management Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220-6292 <i>Ruby 59</i>	B. Received by (Printed Name) <i>Jessica Horner</i> C. Date of Delivery <i>30/13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
2. Article Number (Transfer from service label)	3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
7002 3150 0001 5967 3409 PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540	