

# Initial Application Part I

Received: 01/28/2019

*This application is placed in file for record. It MAY or MAY NOT have been reviewed to be determined Administratively Complete*

Revised March 23, 2017

SWD 1893

RECEIVED: 1/28/2019	REVIEWER:	TYPE: SWD	APP NO: DMA 19028 59117
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ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

**NEW MEXICO OIL CONSERVATION DIVISION**  
 - Geological & 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

**Applicant:** 3Bear Field Services, LLC **OGRID Number:** 372603  
**Well Name:** Smith Ranch SWD #1 **API:** 30-025-45390  
**Pool:** SWD; Silurian-Devonian **Pool Code:** 97869

**SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW**

**1) TYPE OF APPLICATION:** Check those which apply for [A]

A. Location - Spacing Unit - Simultaneous Dedication

☐ NSL

☐ NSP (PROJECT AREA)

☐ NSP (PRORATION UNIT)

☐ SD

B. Check one only for [I] or [II]

[I] Commingling - Storage - Measurement

☐ DHC

☐ CTB

☐ PLC

☐ PC

☐ OLS

☐ OLM

[II] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery

☐ WFX

☐ PMX

☒ SWD

☐ IPI

☐ EOR

☐ PPR

**FOR OCD ONLY**

☐

Notice Complete

☐

Application  
Content  
Complete

**2) NOTIFICATION REQUIRED TO:** Check those which apply.

A. ☒ Offset operators or lease holders

B. ☐ Royalty, overriding royalty owners, revenue owners

C. ☒ Application requires published notice

D. ☐ Notification and/or concurrent approval by SLO

E. ☐ Notification and/or concurrent approval by BLM

F. ☒ Surface owner

G. ☒ For all of the above, proof of notification or publication is attached, and/or,

H. ☐ No notice required

**3) 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.

**Ramona Hovey - Agent of 3Bear Field Service**

Print or Type Name

*Ramona Hovey*

Signature

January 24, 2019

Date

(512) 600-1777

Phone Number

ramona@lonquist.com

e-mail Address

January 24, 2019

New Mexico Energy, Minerals, and Natural Resources Department  
Oil Conservation Division District IV  
1220 South St. Francis Drive  
Santa Fe, New Mexico 87505  
(505) 476-3440

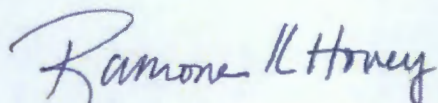
**RE: SMITH RANCH SWD NO. 1 AUTHORIZATION TO INJECT**

To Whom It May Concern:

Attached for your review is Form C-108, Application for Authorization to Inject, and its supplemental documents prepared for 3Bear Field Service, LLC's (3Bear") Smith Ranch SWD No. 1. In addition, Forms C-101 and C-102 have also been included with this package. Notices have been sent to offset, operators, leaseholders and the surface owner. Proof of notice will be sent to the OCD upon receipt.

Any questions should be directed towards 3Bear Field Service, LLC's agent Lonquist & Co., LLC.

Regards,



Ramona Hovey  
Sr. Petroleum Engineer  
Lonquist & Co., LLC

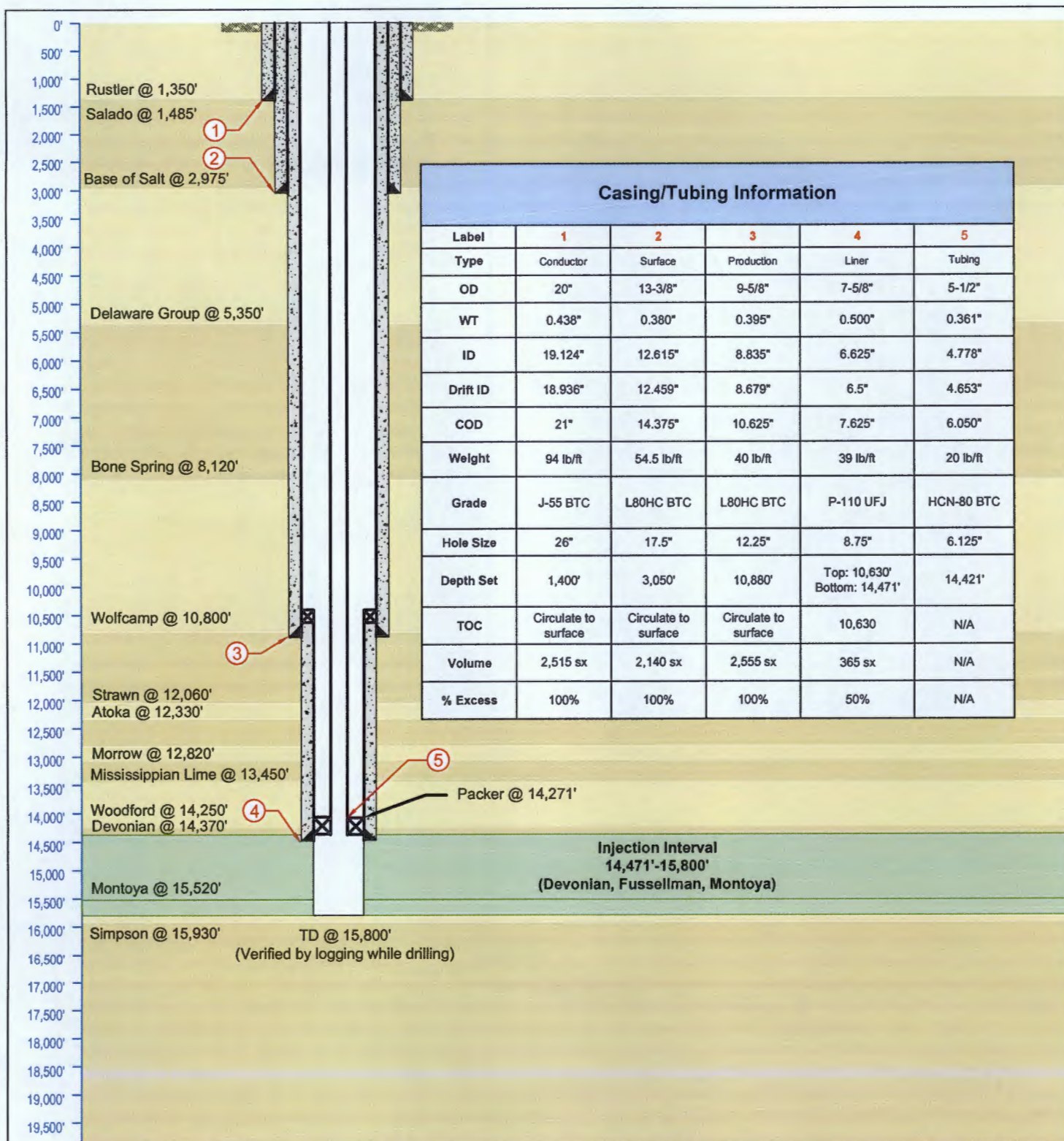
(512) 600-1777  
[ramona@lonquist.com](mailto:ramona@lonquist.com)



APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage  
Application qualifies for administrative approval? X Yes No
- II. OPERATOR: 3Bear Field Service, LLC  
ADDRESS: 415 W. Wall St., Suite 1212  
CONTACT PARTY: Kevin Burns PHONE: 432-686-2973
- 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 X 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 geologic data on the injection zone including appropriate lithologic detail, geologic 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 sources 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 sources 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: Ramona Hovey TITLE: Consulting Engineer – Agent for 3Bear Field Service  
SIGNATURE: Ramona Hovey DATE: 1/24/2019  
E-MAIL ADDRESS: ramona@lonquist.com
- \* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: \_\_\_\_\_





<b>LONQUIST &amp; CO. LLC</b> PETROLEUM ENGINEERS ENERGY ADVISORS HOUSTON   CALGARY AUSTIN   WICHITA   DENVER Texas License F-9147 12912 Hill Country Blvd. Ste F-200 Austin, Texas 78738 Tel: 512.732.9812 Fax: 512.732.9816	3Bear Field Services, LLC		Smith Ranch SWD No. 1	
	Country: USA		State/Province: New Mexico	County/Parish: Lea
	Location:		Site: 358 FNL, 2,362 FEL	Survey: S35-T19S-R33E
	API No: N/A		Field:	Well Type/Status: SWD
	NMOCD District No: 1		Project No:	Date: 01/23/2019
Drawn: TFM		Reviewed:		Approved:
Rev No: 1		Notes:		



3Bear Field Services, LLC

Smith Ranch SWD No. 1

**FORM C-108 Supplemental Information**

**III. Well Data**

**A. Wellbore Information**

1.

Well information	
Lease Name	Smith Ranch SWD
Well No.	1
Location	S-35 T-19S R-33E
Footage Location	358' FNL & 2,362' FEL

2.

**a. Wellbore Description**

Casing Information				
Type	Surface	Intermediate	Production	Liner
OD	20"	13.375"	9.625"	7.625"
WT	0.438"	0.38"	0.395"	0.500"
ID	19.124"	12.615"	8.835"	6.625"
Drift ID	18.936"	12.459"	8.679"	6.500"
COD	21"	14.375"	10.625"	7.625"
Weight	94 lb/ft	54.5 lb/ft	40 lb/ft	39 lb/ft
Grade	J-55 BTC	L80HC BTC	L80HC BTC	P-110 UFJ
Hole Size	26"	17.5"	12.25"	8.75"
Depth Set	1,400'	3,050'	10,880'	10,630'-14,471'



b. Cementing Program

Cement Information				
Casing String	Conductor	Intermediate	Intermediate 2	Liner
Lead Cement	Class C	Class C	Class H	
Lead Cement Volume	1,620 sks	1,485 sks	1,575 sks	
Lead Cement Density	12.2 ppg	12.7 ppg	12.7 ppg	
Tail Cement	Class C	Class C	Class H	Class H
Tail Cement Volume	895 sks	655 sks	980 sks	365 sks
Tail Cement Density	14.8 ppg	14.8 ppg	14.5 ppg	14.5 ppg
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	10,630'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Logged

3. Tubing Description

Tubing Information	
OD	5.5"
WT	0.361"
ID	4.778"
Drift ID	4.653
COD	6.050"
Weight	20 lb/ft
Grade	HCN-80 BTC
Depth Set	0-14,421'

Tubing will be lined with Duoline.

4. Packer Description

7-5/8" x 5-1/2" TCPC Permanent Packer with High Temp Elastomer and Full Inconel 925 trim

B. Completion Information

1. Injection Formation: Devonian, Silurian, Fusselman, Montoya

2. Gross Injection Interval: 14,471'-15,800'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'

#### VI. Area of Review

No wells within the area of review penetrate the proposed injection zone.

#### VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD  
Maximum Volume: 25,000 BPD

2. Closed System
3. Anticipated Injection Pressure:

Average Injection Pressure: 2,156 PSI (surface pressure)  
Maximum Injection Pressure: 2,874 PSI (surface pressure)

4. The injection fluid is to be locally produced water. It is expected that the source water will predominantly be from the Bone Spring and Wolfcamp formations. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Spring, Wolfcamp, Artesia, Pennsylvanian, San Andreas, and Delaware formations.
5. The disposal interval is non-productive. No water samples are available from the surrounding area.



## VIII. Geological Data

### Devonian Formation Lithology:

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation include two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a tremendous Salt Water Disposal horizon.

### Fusselman Formation Lithology:

The Silurian/Ordovician Fusselman Formation is stratigraphically below the Wristen Group and is above and separated from the Montoya Formation by the Sylvan Shale. The Sylvan Shale is the lower confining layer for the proposed Smith Ranch SWD No. 1 well. Fusselman facies include a laminated skeletal wackestone in the upper part and a buildup complex in the lower part composed of ooid and bryozoan grainstones. These grainstones can also be potentially prolific zones for disposal.

### Montoya Formation Lithology:

The Montoya Group of Late Ordovician age unconformably overlies the Simpson Group. The Montoya is composed of light gray to medium-dark gray, fine- to medium-crystalline, calcareous dolomite, some units of which are interbedded with shale or dark-gray limestone and some units of which contain white to very light-gray chert. The Montoya carbonate limestone dolomite sequence is dense, impermeable, and non-porous.

**A. Injection Zone: Siluro-Devonian Formation**

<b>Formation</b>	<b>Depth</b>
Rustler	1,350'
Salado	1,485'
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'
Morrow	12,820'
Barnett	13,070'
Mississippian Lime	13,450'
Woodford	14,250'
Devonian	14,370'
Montoya	15,520'
Simpson	15,930'

**B. Underground Sources of Drinking Water**

One water well exists within one mile of the proposed well. Across the area, fresh water wells are usually drilled between 50' and 850' in depth. The Rustler is known to exist in this general area and may also be another USDW and will be protected through the top of the Salado Formation at 1,485' by setting surface casing at 1,400' and intermediate casing at 3,050' below the Salado.

**IX. Proposed Stimulation Program**

No stimulation program planned.

**X. Logging and Test Data on the Well**

There are no logs or test data on the well. During the process of drilling and completion resistivity, gamma ray, and density logs will be run.

**XI. Chemical Analysis of Fresh Water Wells**

Attached is a map of the one (1) water well that exist within one mile of the well location. Samples from the well have been obtained and analysis results will be provided as soon as possible. A Water Right Summary from the New Mexico Office of the State Engineer is attached for water well CP-00658-POD1.



**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

**State of New Mexico**  
**Energy Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 South St. Francis Dr.**  
**Santa Fe, NM 87505**

Form C-101  
Revised July 18, 2013

☐ AMENDED REPORT

NOV 30 2018  
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F/P

**APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE**

<sup>1</sup> Operator Name and Address 3BEAR FIELD SERVICES, LLC 1512 LARIMER ST., SUITE 540 DENVER, CO 80202		<sup>2</sup> OGRID Number 372603
<sup>3</sup> Property Code 722448		<sup>4</sup> APL Number 30-025-44390
<sup>5</sup> Property Name SMITH RANCH SWD		<sup>6</sup> Well No. 1

**7. Surface Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
A	35	19S	33E		358	NORTH	2362	EAST	LEA

**8. Proposed Bottom Hole Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

**9. Pool Information**

<sup>10</sup> Pool Name SWD; DEVONIAN-SILURIAN	<sup>11</sup> Pool Code 97869
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**Additional Well Information**

<sup>12</sup> Work Type N	<sup>13</sup> Well Type S	<sup>14</sup> Cable/Rotary R	<sup>15</sup> Lease Type F	<sup>16</sup> Ground Level Elevation 3258 3595
<sup>17</sup> Multiple YES	<sup>18</sup> Proposed Depth 15,800'	<sup>19</sup> Formation SILURO-DEVONIAN	<sup>20</sup> Contractor JDC DRILLING	<sup>21</sup> Spud Date UPON APPROVAL OF C-108
<sup>22</sup> Depth to Ground water 110'	<sup>23</sup> Distance from nearest fresh water well 2963'	<sup>24</sup> Distance to nearest surface water 11,600 (LAGUNA TONTO)		

☒ We will be using a closed-loop system in lieu of lined pits

**21. Proposed Casing and Cement Program**

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
SURF	26"	20.0"	94# J-55	1400	2515	0
INTER	17.5	13.375"	54.5# J-55	3050	2140	0
PROD INTER-2	12.25"	9.625"	40# L-80 HC	10880	2555	0

**Casing/Cement Program: Additional Comments**

LINER/8.75"/7.625"/39# P-110 UFJ/14471/365 SXS/TOC @ 10630'; OPEN HOLE FROM 1400'-15800'; PLEASE SEE ATTACHED WBD

**22. Proposed Blowout Prevention Program**

Type	Working Pressure	Test Pressure	Manufacturer
	SEE ATTACHMENT		

<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.  
I further certify that I have complied with 19.15.14.9 (A) NMAC ☒ and/or 19.15.14.9 (B) NMAC ☒ if applicable.  
Signature: *Jennifer Elrod*

Printed name: JENNIFER ELROD

Title: SR. REGULATORY TECH

E-mail Address: jelrod@chisholmenenergy.com

Date: 11/29/2018

Phone: 817-953-3728

**OIL CONSERVATION DIVISION**

Approved By:

Title: *Petroleum Engineer*

Approved Date: 12/04/18

Expiration Date: 12/04/20

Conditions of Approval Attached

**See Attached  
Conditions of Approval**



# CONDITIONS OF APPROVAL

API #	Operator	Well name & Number
30-025-45390	3BEAR FIELD SERVICES LLC	SMITH RANCH SWD # 001

Applicable conditions of approval marked with XXXXXX

## Administrative Orders Required

XXXXXXX	Review administrative order when approved for additional conditions of approval

## Other wells

## Casing

XXXXXXX	1) SURFACE & INTERMEDIATE CASING - Cement must circulate to surface -- 2) PRODUCTION CASING - Cement must circulate to surface -- 3) Liner – Cement must tie back into production casing
XXXXXXX	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water

## Lost Circulation

XXXXXXX	Must notify OCD Hobbs Office if lost circulation is encountered at 575-370-3186

## Water flows

XXXXXXX	Must notify OCD Hobbs Office of any water flow in the Salado formation at 575-370-3186. Report depth and flow rate.

## Stage Tool

XXXXXXX	Must notify OCD Hobbs Office prior to running Stage Tool at 575-370-3186
XXXXXXX	If using Stage Tool on Surface casing, Stage Tool must be greater than 350' and a minimum 200 feet above surface shoe.
XXXXXXX	When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet below previous casing shoe.

## Completion & Production

XXXXXXX	Will require a deviational survey with the C-105
XXXXXXX	Must notify Hobbs OCD office prior to conducting MIT (575) 393-6161 ext. 114
XXXXXXX	May not inject prior to SWD order approval
XXXXXXX	Must conduct & pass MIT prior to any injection



District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-9720  
District II  
811 S. First St., Artesia, NM 88210  
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State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

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

NOV 29 2018  
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number <b>70-025-45390</b>	<sup>2</sup> Pool Code <b>97869</b>	<sup>3</sup> Pool Name <b>SILURO-DEVONIAN</b>
<sup>4</sup> Property Code <b>322448</b>	<sup>5</sup> Property Name <b>SMITH RANCH SWD</b>	<sup>6</sup> Well Number <b>1</b>
<sup>7</sup> OGRID No. <b>372603</b>	<sup>8</sup> Operator Name <b>3BEAR FIELD SERVICES, LLC</b>	<sup>9</sup> Elevation <b>3595'</b>

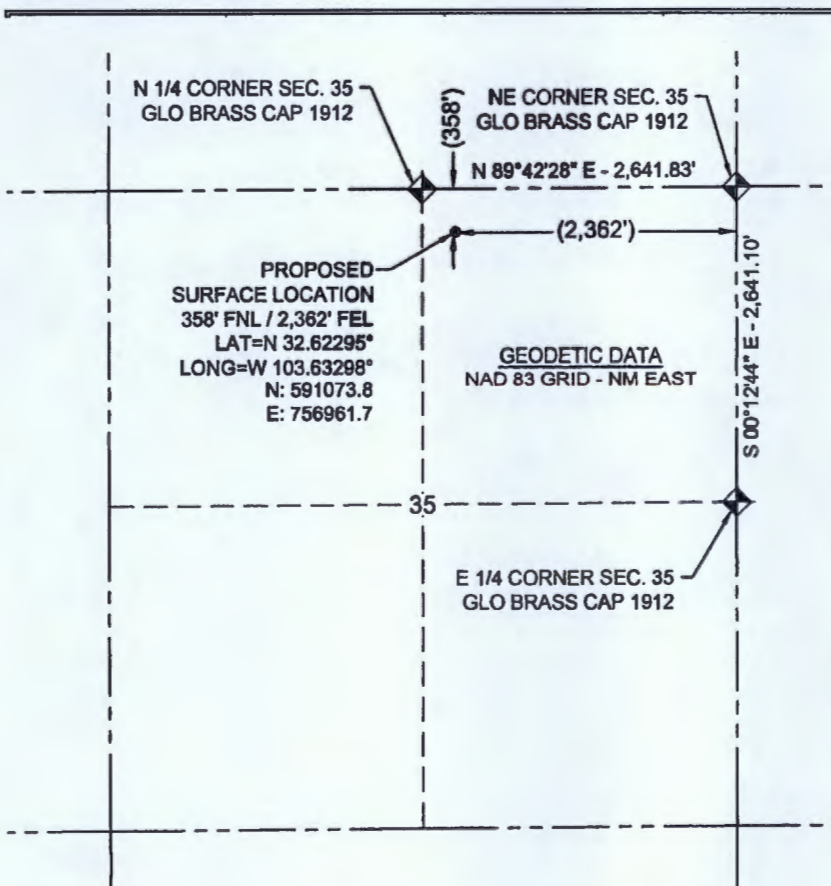
" Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
NE 1/4 (A)	35	19S	33E		358	NORTH	2,362	EAST	LEA

" 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
<sup>12</sup> Dedicated Acres	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.						

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.



" OPERATOR CERTIFICATION

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.

*Jennifer Elrod* 11/29/2018  
Signature Date

JENNIFER ELROD

Printed Name

jelrod@chisholmenergy.com

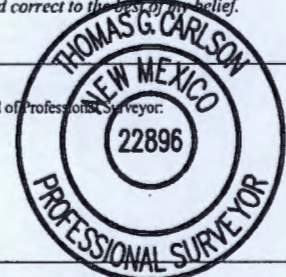
E-mail Address

" SURVEYOR CERTIFICATION

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.

6/02/18  
Date of Survey

Signature and Seal of Professional Surveyor:



22896  
Certificate Number

**From:** Bell, Ric [<mailto:Ric.Bell@mosaicco.com>]  
**Sent:** Tuesday, November 6, 2018 10:48 AM  
**To:** Kevin Burns <[kburns@3bearllc.com](mailto:kburns@3bearllc.com)>; [jrutley@blm.gov](mailto:jrutley@blm.gov)  
**Cc:** Douglas Swanson <[tbarsllc@aol.com](mailto:tbarsllc@aol.com)>; Morehouse, Dan <[Dan.Morehouse@mosaicco.com](mailto:Dan.Morehouse@mosaicco.com)>  
**Subject:** 3 Bear Energy SWD Wells

Kevin,  
Mosaic will not object to the #2 Smith Ranch SWD located 1297'FNL, 1154FEL, Sec 25, T19S, R33E. We will also not object to the #1 Smith Ranch SWD located 358'FNL, 2362FEL, Sec 35, T19S, R33E.  
Cheers,  
Ric



**Ric Bell | Senior Geologist**  
The Mosaic Company | 1361 Potash Mines Road | Carlsbad, New Mexico, 88220  
P: 575.628.6242 | C: 575.361.3854 | E: [ric.bell@mosaicco.com](mailto:ric.bell@mosaicco.com) |  
W: [www.mosaicco.com](http://www.mosaicco.com)

**From:** Rutley, James [<mailto:jrutley@blm.gov>]  
**Sent:** Tuesday, November 6, 2018 9:32 AM  
**To:** Kevin Burns <[kburns@3bearllc.com](mailto:kburns@3bearllc.com)>  
**Cc:** Bell, Ric - Carlsbad (Third Party) <[ric.bell@mosaicco.com](mailto:ric.bell@mosaicco.com)>; Douglas Swanson <[tbarsllc@aol.com](mailto:tbarsllc@aol.com)>; [dan.morehouse@mosaicco.com](mailto:dan.morehouse@mosaicco.com)  
**Subject:** Re: [EXTERNAL] FW: 3 Bear Energy proposed SWD well 19-33 Sec 35

Good Morning Kevin,

I apologize for not getting back to you sooner. We're a little thin staffed in geology department with two employees going to other departments both in our office and the State Office. Covering a lot of ground till the positions are filled.

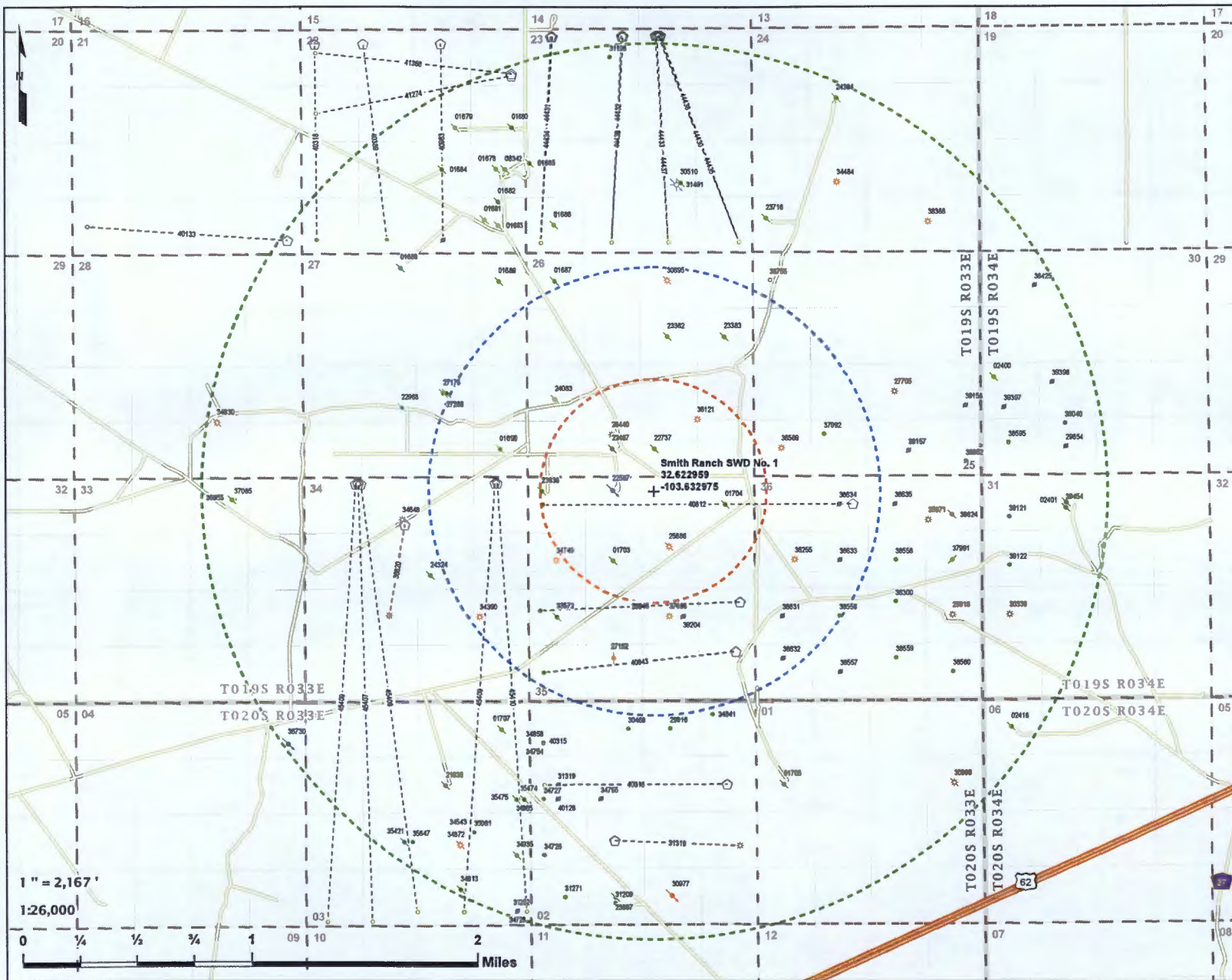
I have reviewed both Smith Ranch SWD locations in Sections 25 and 35 of 19S 33E. BLM has no concern with either location as staked. The Section 35 well is within the corridor for drilling being established to the east and west of this location. The Section 25 well is outside of R-111-P and development area is not required.

Thank you for running the locations by me.

Jim

*James G. Rutley*





1" = 2,167'  
1:26,000



### Smith Ranch SWD No. 1

2 Mile Area of Review

3Bear Field Services LLC

Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)

Drawn by: SJL Date: 1/21/2019 Approved by: TFM

### LONQUIST & CO. LLC

PETROLEUM  
ENGINEERS ENERGY  
ADVISORS

AUSTIN HOUSTON WICHITA DENVER CALGARY

- + Smith Ranch SWD No. 1
- 1/2 Mile Radius
- 1 Mile Radius
- 2 Mile Radius
- QQ-Section [NM-PLSS 2nd Div.]
- 1 Section [NM-PLSS 1st Div.]
- Township/Range [NM-PLSS]
- Laterals
- API (30-025-...) SHL Status - Type (Count)
  - Horizontal Surface Location (26)
  - Active - Oil (24)
  - Active - Gas (15)
  - Active - Salt Water Disposal (2)
  - Active - Injection (1)
  - Permitted - Gas (1)
  - Plugged (Not Released) - Oil (1)
  - Plugged (Site Released) - Oil (45)
  - Plugged (Site Released) - Gas (5)
  - Plugged (Site Released) - Salt Water Disposal (1)
  - Expired TA - Gas (1)
  - Canceled Location (20)
- API (30-025-...) BHL Status - Type (Count)
  - Active - Oil (5)
  - Active - Gas (2)
  - Permitted - Oil (18)
  - Canceled Location (1)

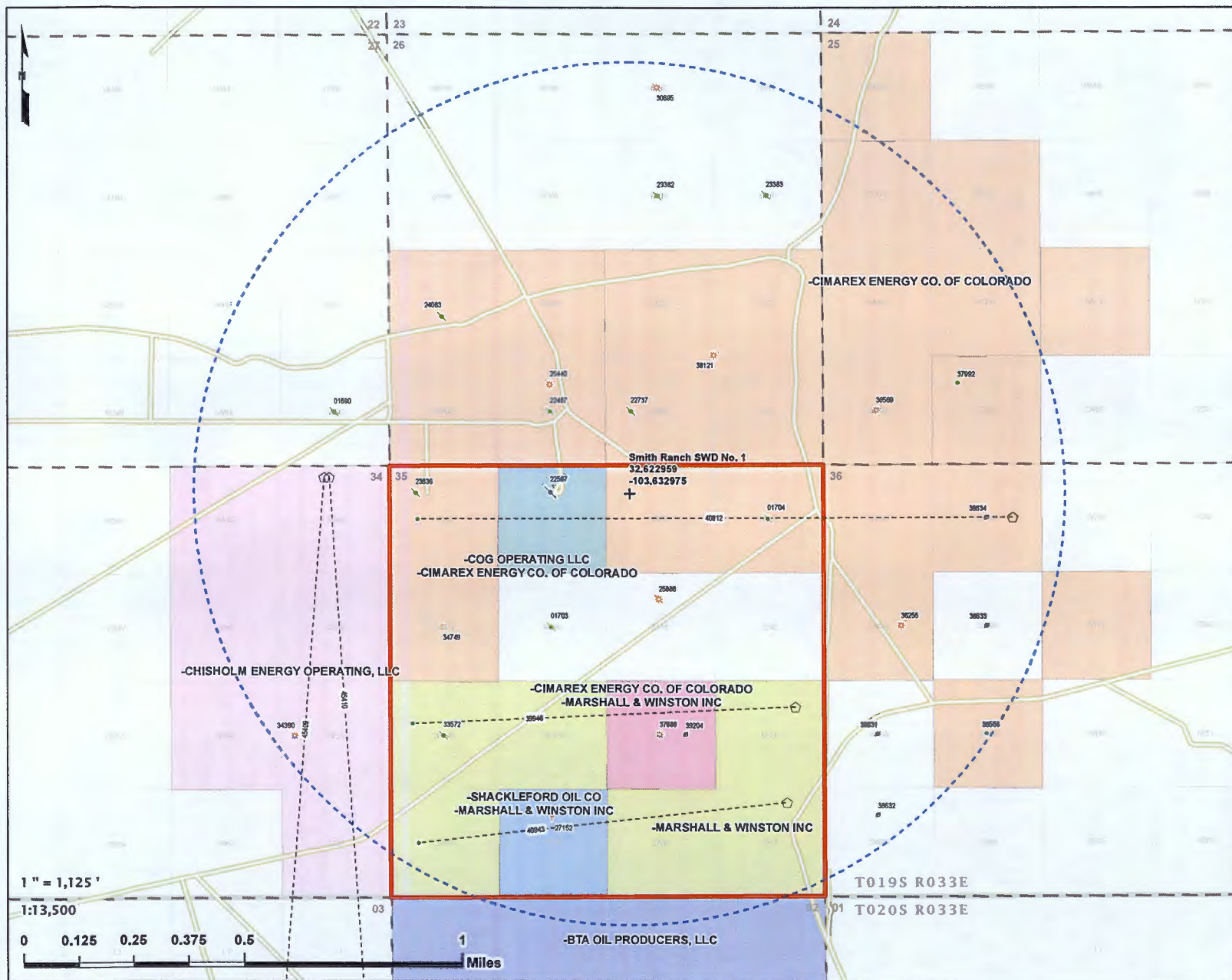
\*Well Data Source: NM-OCD/DrillingInfo (2019)



Smith Ranch SWD No. 1  
1 Mile Area of Review List

API (30-025-...)	WELL NAME	WELL TYPE	STATUS	OPERATOR	TVD (FT.)	LATITUDE (NAD83 DD)	LONGITUDE (NAD83 DD)	DATE DRILLED	FIELD
01690	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3525	32.6257553000	-103.644660900	9/28/1948	-
01703	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3615	32.6184883000	-103.636108400	12/14/1956	-
01704	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	4150	32.6221046000	-103.627533000	NR	-
22487	BATE FEDERAL #001	O	P	COG OPERATING LLC	3397	32.6257439000	-103.636085500	4/28/1968	[27390] GEM, YATES, EAST
22597	BATE FEDERAL #003	S	A	COG OPERATING LLC	3514	32.6230240000	-103.636093100	5/31/1968	[96090] SWD, YATES; [96141] SWD, YATES-SEVEN RIVERS
22737	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3570	32.6257401000	-103.632881200	9/10/1968	-
23382	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3655	32.6329880000	-103.631782500	11/29/1969	-
23383	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	70	32.6329842000	-103.627494800	11/30/1969	-
23636	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3406	32.6230316000	-103.641449000	11/24/1970	-
24083	PRE-ONGARD WELL #002	O	P	PRE-ONGARD WELL OPERATOR	3453	32.6289673000	-103.640358000	4/10/1972	-
25886	LAGUNA DEEP FEDERAL #001	G	P	CIMAREX ENERGY CO. OF COLORADO	14753	32.6193886000	-103.631835900	7/29/1978	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
26440	LAGUNA DEEP FEDERAL UNIT #002	G	A	CIMAREX ENERGY CO. OF COLORADO	13490	32.6266518000	-103.636077900	11/8/1979	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
27152	LAGUNA DEEP FEDERAL #003	G	E	SHACKELFORD OIL CO	13600	32.6121445000	-103.636131300	8/30/1981	[27390] GEM, YATES, EAST; [58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
30695	LAGUNA DEEP FEDERAL UNIT #004	G	P	CIMAREX ENERGY CO. OF COLORADO	13560	32.6366158000	-103.631767300	10/16/1989	[77380] GEM, MORROW, EAST (GAS)
33572	GEM 35 FEDERAL #001	O	P	BEPCO, LP	9500	32.6148682000	-103.640411400	9/6/1996	[95838] DRY AND ABANDONED
34390	JADE 34 FEDERAL #001	G	A	CHISHOLM ENERGY OPERATING, LLC	13690	32.6148720000	-103.646286000	12/4/2009	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
34749	LAGUNA DEEP FEDERAL UNIT #005	G	A	CIMAREX ENERGY CO. OF COLORADO	13650	32.6184921000	-103.640396100	11/2/1999	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
36255	LAGUNA DEEP UNIT #007	G	A	CIMAREX ENERGY CO. OF COLORADO	13617	32.6184692000	-103.622822100	6/11/2003	[2260] APACHE RIDGE, BONE SPRING; [77380] GEM, MORROW, EAST (GAS); [96485] QUAIL RIDGE, ATOKA (GAS)
36569	LAGUNA DEEP UNIT #008	G	A	CIMAREX ENERGY CO. OF COLORADO	13660	32.6257286000	-103.623230000	8/22/2005	[77380] GEM, MORROW, EAST (GAS)
37686	LAGUNA DEEP UNIT #009	G	A	CIMAREX ENERGY CO. OF COLORADO	13635	32.6148605000	-103.631851200	8/1/2006	[59500] TONTO, WOLFCAMP
37992	LAGUNA DEEP UNIT #012	O	A	CIMAREX ENERGY CO. OF COLORADO	10460	32.6266327000	-103.620010400	8/4/2006	[2260] APACHE RIDGE, BONE SPRING
38121	LAGUNA DEEP UNIT #010	G	A	CIMAREX ENERGY CO. OF COLORADO	13669	32.6276054000	-103.629592900	11/16/2006	[77380] GEM, MORROW, EAST (GAS)
38556	LAGUNA DEEP UNIT #016	O	A	CIMAREX ENERGY CO. OF COLORADO	10430	32.6148491000	-103.618988000	10/11/2007	[2260] APACHE RIDGE, BONE SPRING
38631	LAGUNA DEEP UNIT #018	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6148540840	-103.623267787	-	[2260] APACHE RIDGE, BONE SPRING
38632	LAGUNA DEEP UNIT #019	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6121191504	-103.623278946	-	[2260] APACHE RIDGE, BONE SPRING
38633	LAGUNA DEEP UNIT #020	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6184684677	-103.618945447	-	[2260] APACHE RIDGE, BONE SPRING
38634	LAGUNA DEEP UNIT #021C	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6220967188	-103.618990626	-	[2260] APACHE RIDGE, BONE SPRING
39204	LAGUNA DEEP UNIT #022J	O	C	MURCHISON OIL & GAS INC	0	32.6148602127	-103.630806107	-	[58960] TEAS, BONE SPRING
39946	LAGUNA DEEP UNIT 35 FEDERAL #001	O	A	MARSHALL & WINSTON INC	9341	32.6157646000	-103.626487700	11/7/2010	[58960] TEAS, BONE SPRING
40812	LAGUNA DEEP UNIT #021H	O	A	CIMAREX ENERGY CO. OF COLORADO	9380	32.6220970000	-103.617889400	11/16/2012	[58960] TEAS, BONE SPRING
40943	LAGUNA DEEP UNIT 35 FEDERAL #002H	O	A	MARSHALL & WINSTON INC	9429	32.6125488000	-103.626846300	7/4/2013	[58960] TEAS, BONE SPRING
45409	JADE 34 3 2BS FEDERAL COM #007H	O	N	CHISHOLM ENERGY OPERATING LLC	0	32.6235430000	-103.645082000	-	[58960] TEAS, BONE SPRING
45410	JADE 34 3 2BS FEDERAL COM #008H	O	N	CHISHOLM ENERGY OPERATING LLC	0	32.6235430000	-103.644886000	-	[58960] TEAS, BONE SPRING





**Smith Ranch SWD No. 1**

**1 Mile Offset Operators**

**3Bear Field Services LLC**

**Lea County, NM**

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)

Drawn by: SJL | Date: 1/22/2019 | Approved by: TFM

**LONQUIST & CO. LLC**

PETROLEUM ENGINEERS | ENERGY ADVISORS

AUSTIN | HOUSTON | WICHITA | DENVER | CALGARY

+ Smith Ranch SWD No. 1 BHL  
 1 Mile Radius  
 OQ-Section (NM-PLSS 2nd Dk.)  
 1 Section (NM-PLSS 1st Dk.)  
 Township/Range (NM-PLSS)  
 Surface Owner Property Boundary (Smith Kenneth INC)  
 Laterals  
 API (20-425-...) BHL Status - Type (Count)  
 Horizontal Surface Location (5)  
 Active - Oil (2)  
 Active - Gas (7)  
 Active - Salt Water Disposal (1)  
 Plugged (Site Released) - Oil (10)  
 Plugged (Site Released) - Gas (2)  
 Expired TA - Gas (1)  
 Canceled Location (5)  
 API (20-425-...) BHL Status - Type (Count)  
 Active - Oil (2)  
 Permitted - Oil (2)

**Operators**  
 -BTA OIL PRODUCERS, LLC  
 -CHISHOLM ENERGY OPERATING, LLC  
 -CIMAREX ENERGY CO. OF COLORADO  
 -CIMAREX ENERGY CO. OF COLORADO; MARSHALL & WINSTON INC  
 -COG OPERATING LLC; CIMAREX ENERGY CO. OF COLORADO  
 -MARSHALL & WINSTON INC  
 -SHACKLEFORD OIL CO; MARSHALL & WINSTON INC

\*Well Data Source: NM-OCDDrillingInfo (2019)

CHAVES

LEA

EDDY

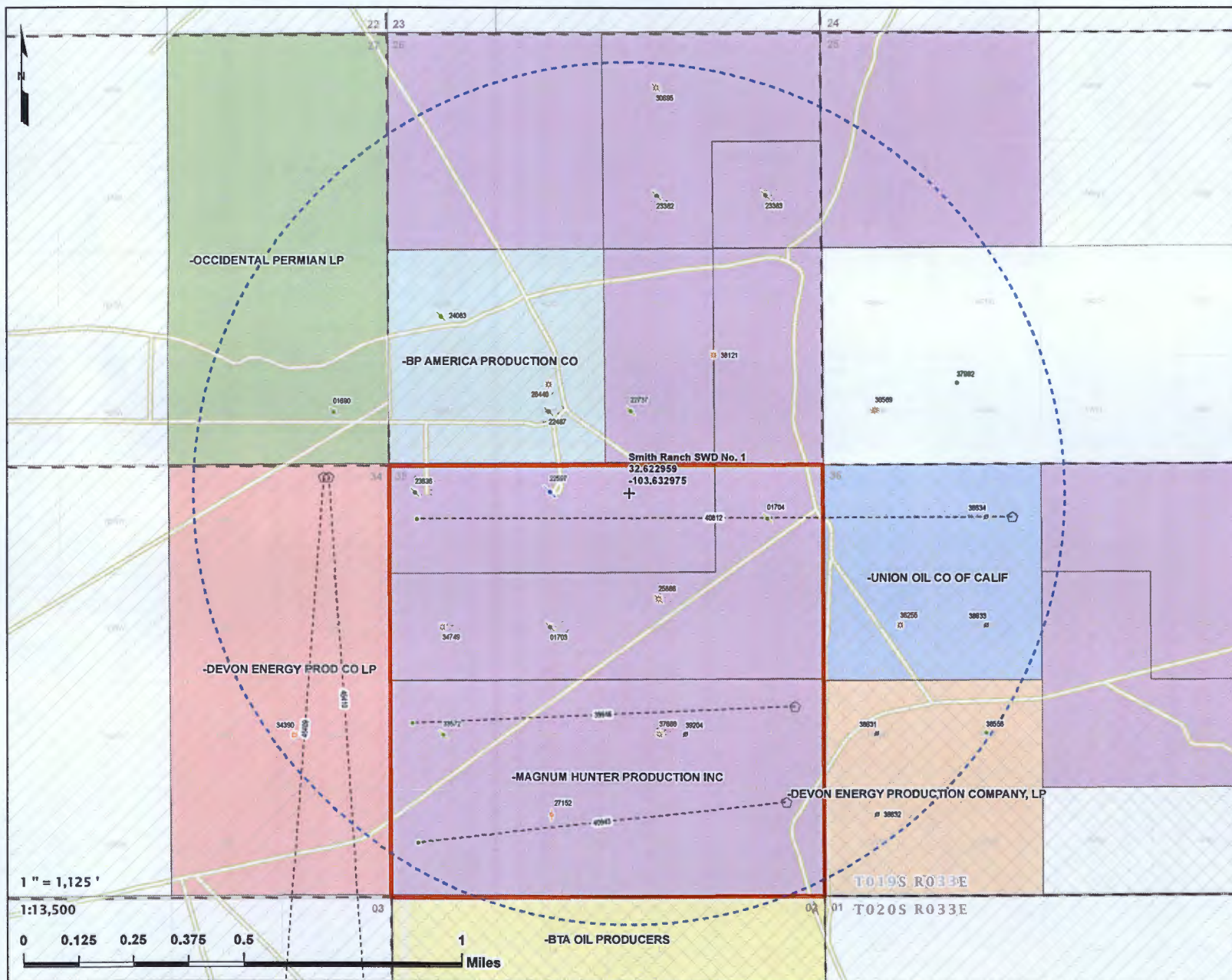
Map Extent

132

NEW MEXICO

ANDREWS TEXAS

GAINES



# Smith Ranch SWD No. 1

1 Mile Offset Lessees

3 Bear Field Services LLC

Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)

Drawn by: SJL

Date: 1/22/2019

Approved by: TFM

## LONGQUIST & CO. LLC

PETROLEUM  
ENGINEERS

ENERGY  
ADVISORS

AUSTIN HOUSTON WICHITA DENVER CALGARY

- + Smith Ranch SWD No. 1 SHL
- 1 Mile Radius
- QQ-Section [NM-PLSS 2nd Div.]
- 1 Section [NM-PLSS 1st Div.]
- Township/Range [NM-PLSS]
- NM - BLM
- NM - SLO
- Surface Owner Property Boundary (Smith Kenneth INC)
- Laterals
- API (30-025-...) SHL Status - Type (Count)
- Horizontal Surface Location (5)
- Active - Oil (2)
- Active - Gas (7)
- Active - Salt Water Disposal (1)
- Plugged (Site Released) - Oil (10)
- Plugged (Site Released) - Gas (2)
- Expired TA - Gas (1)
- Canceled Location (5)
- API (30-025-...) BHL Status - Type (Count)
- Active - Oil (3)
- Permitted - Oil (2)
- Lessees
- BP AMERICA PRODUCTION CO
- BTA OIL PRODUCERS
- DEVON ENERGY PROD CO LP
- DEVON ENERGY PRODUCTION COMPANY, LP
- MAGNUM HUNTER PRODUCTION INC
- OCCIDENTAL PERMIAN LP
- UNION OIL CO OF CALIF

\*Well Data Source: NM-OCDDrillingInfo (2019)



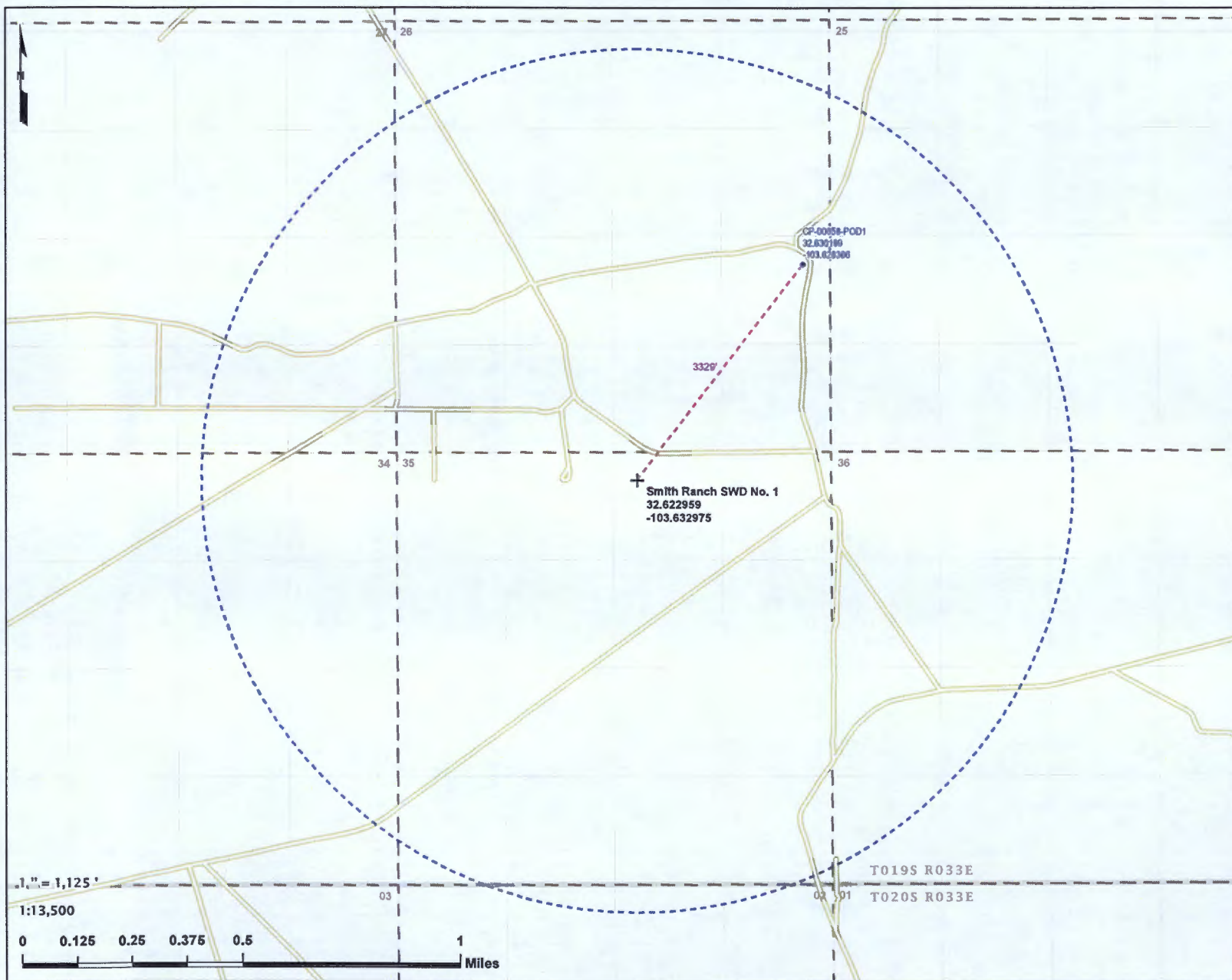


Smith Ranch SWD No. 1  
1 Mile Offset Operators and Lessees List

S/T/R	QQ UNIT LETTER(S)	OPERATOR	MINERAL LESSEE	MINERAL OWNER	SURFACE OWNER	ADDRESS 1	ADDRESS 2
27/19S/33E	A,G,H,I,J,O,P	-	OCCIDENTAL PERMIAN LP	-	-	5 E GREENWAY PLAZA #110	HOUSTON, TX 77046
28/19S/33E	I,J,K,L,M,N,O,P	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	A,B,C,D,E,F,G,H	-	MAGNUM HUNTER PRODUCTION INC	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
25/19S/33E	D,E,F,J,K,L,M,N	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	O	-	-	PRIVATE (UNKNOWN)	SMITH KENNETH INC	267 SMITH RANCH RD	HOBBS, NM 88240
36/19S/33E	C,D,E,G,K	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	F	-	UNION OIL CO OF CALIF	-	-	PO BOX 2100	HOUSTON, TX 77210
	B	-	MAGNUM HUNTER PRODUCTION INC	-	-	600 N MARIENFELD STREET, SUITE 600	MIDLAND, TX 79701
	L,M,N	-	DEVON ENERGY PRODUCTION COMPANY, LP	-	-	333 W. SHERIDAN AVENUE	OKLAHOMA CITY, OK 73102
35/19S/33E	A,B,D,E	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	C	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
		COG OPERATING LLC	-	-	-	550 W TEXAS	MIDLAND, TX 79701
	I,K,L,M,O,P	MARSHALL & WINSTON INC	-	-	-	PO BOX 50880	MIDLAND, TX 79710
	J	MARSHALL & WINSTON INC	-	-	-	PO BOX 50880	MIDLAND, TX 79710
		CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	N	MARSHALL & WINSTON INC	-	-	-	PO BOX 50880	MIDLAND, TX 79710
		SHACKLEFORD OIL CO	-	-	-	PO BOX 10685	MIDLAND, TX 79702
	F,G,H	-	MAGNUM HUNTER PRODUCTION INC	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
34/19S/33E	A,B,G,H,I,J,P	CHISHOLM ENERGY OPERATING, LLC	-	-	-	801 CHERRY STREET	FORT WORTH, TX 76102
2/20S/33E	A,B,C,D	BTA OIL PRODUCERS, LLC	-	-	-	104 S PECOS	MIDLAND, TX 79701
Surface Location	-	-	-	-	SMITH KENNETH INC	267 SMITH RANCH RD	HOBBS, NM 88240

Smith Ranch SWD No. 1 Offsetting Produced Water Analysis																	
Well Name	API	Section	Township	Range	Unit	Formation	ph	TDS (mg/L)	Sodium (mg/L)	Calcium (mg/L)	Iron (mg/L)	Magnesium (mg/L)	Manganese (mg/L)	Chloride (mg/L)	Bicarbonate (mg/L)	Sulfate (mg/L)	CO2 (mg/L)
MAGNOLIA STATE #001	3002501701	32	19S	33E	B	ARTESIA		8771						4301	1538	180	
NELLIS FEDERAL #003	3002526091	6	19S	33E	F	ARTESIA	6.8	70660						42600	549	365	
BATE FEDERAL #003	3002522597	35	19S	33E	C	ARTESIA	7.8	117622						66700	506	5800	
NELLIS A FEDERAL #004	3002525912	8	19S	33E	E	BONE SPRING	6.9	48582						28900	763	160	
MALACHITE 22 FEDERAL #001H	3002540318	22	19S	33E	D	BONE SPRING 1ST SAND	6.4		73407	1293	33	265	0.26	116995	780	480	250
PLAYA 2 STATE #001H	3002540405	2	19S	34E	N	BONE SPRING 3RD SAND	6.5	182368	41880	7125	31.4	1158	1.06	81893	353.8	823	190
PLAYA 2 STATE #002H	3002540549	2	19S	34E	M	BONE SPRING 3RD SAND	6.48	182368	41450	8421	28.1	1264	0.8	85041	362	956	180
LUSK AHB FEDERAL #002	3002531042	35	19S	32E	G	DELAWARE	6.05	220235		22044	45	3525		136969	122	450	
LUSK AHB FEDERAL #005	3002531151	35	19S	32E	B	DELAWARE	6.86	172408		12024	28	1945		104976	146	1800	
LUSK AHB FEDERAL #006	3002531314	35	19S	32E	A	DELAWARE	6.86	125179		4509	8	1520		74983	220	2900	
LUSK AHB FEDERAL #006	3002531314	35	19S	32E	A	DELAWARE	7.1	125396		3507	8	912		69984	303	7400	
NEW MEXICO 24 FEDERAL COM #0	3002539741	24	18S	33E	A	DELAWARE-CHERRY CANYO	7.07	232774.2	67508.7	15857	8	3523	0.2	143232	73.2	887	240
STATE CL #003	3002501575	2	18S	33E	D	GRAYBURG/SAN ANDRES		76321						44800	450	3000	
INEXCO AHY FEDERAL #001	3002525470	7	19S	33E	H	PENNSYLVANIAN	6.5			5600	50	975.3		37062	610	12.5	
BUFFALO FEDERAL UNIT #004	3002501661	4	19S	33E	H	PENNSYLVANIAN		163468						99880	415	848	
FEDERAL AC #002	3002501675	18	19S	33E	E	PENNSYLVANIAN		1305						140	232	510	
LAGUNA PLATA FEDERAL #001	3002501678	22	19S	33E	I	WOLFCAMP		46915						27270	714	1116	





<b>Smith Ranch SWD No. 1</b> <b>Water Wells within 1 Mile</b> <b>3Bear Field Services LLC</b> <b>Lea County, NM</b>		
PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)		
Drawn by: SJL	Date: 1/22/2019	Approved by: TFM
<b>LONQUIST &amp; CO. LLC</b> PETROLEUM ENGINEERS ENERGY ADVISORS AUSTIN · HOUSTON · WICHITA · DENVER · CALGARY		
+ Smith Ranch SWD No. 1		
• Water Well (1)		
[Dashed Blue Circle] 1 Mile Radius		
[Red Dashed Line] Distance Call		
QQ-Section [NM-PLSS 2nd Div.]		
[Dashed Line] Section [NM-PLSS 1st Div.]		
Township/Range [NM-PLSS]		
*Nearest surface water: 11.173' to the SWW **Water Well Data Source: NM - OSE (2019)		



# New Mexico Office of the State Engineer

## Water Right Summary



WR File Number: CP 00658 Subbasin: CP Cross Reference: -  
Primary Purpose: PLS NON 72-12-1 LIVESTOCK WATERING  
Primary Status: DCL DECLARATION  
Total Acres: 0 Subfile: -  
Total Diversion: 2 Cause/Case: -  
Owner: KENNETH SMITH

### Documents on File

Trn #	Doc	File/Act	Status		Transaction Desc.	From/		Acres	Diversion	Consumptive
			1	2		To				
<a href="#">547000</a>	<a href="#">COWNF</a>	<a href="#">1993-08-23</a>	CHG	PRC	CP 00658	T		0	0	
<a href="#">546999</a>	<a href="#">DCL</a>	<a href="#">1982-11-17</a>	DCL	PRC	CP 00658	T		0	2	

### Current Points of Diversion

(NAD83 UTM in meters)

POD Number	Well Tag	Source	Q	Q	Q	Sec	Tws	Rng	X	Y	Other Location Desc
<a href="#">CP 00658 POD1</a>		Shallow	2	2	4	26	19S	33E	628857	3611125*	

\*An (\*) after northing value indicates UTM location was derived from PLSS - see Help

### Priority Summary

Priority	Status	Acres	Diversion	Pod Number	Source
12/31/1920	DCL	0	2	<a href="#">CP 00658 POD1</a>	Shallow

### Place of Use

Q	Q	Q	Q	Sec	Tws	Rng	Acres	Diversion	CU	Use	Priority	Status	Other Location Desc
256	64	16	4				0	2		PLS	12/31/1920	DCL	NO PLACE OF USE GIVEN

### Source

Acres	Diversion	CU	Use	Priority	Source Description
0	2		PLS	12/31/1920	GW

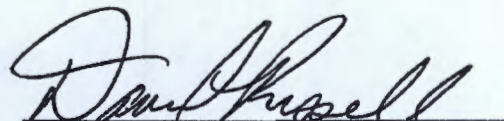


# Affidavit of Publication

STATE OF NEW MEXICO  
COUNTY OF LEA

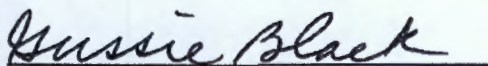
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated  
August 03, 2018  
and ending with the issue dated  
August 03, 2018.



Publisher

Sworn and subscribed to before me this  
3rd day of August 2018.

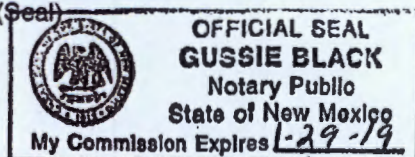


Business Manager

My commission expires

January 29, 2019

(Seal)



## LEGALIS

### LEGAL NOTICE August 3, 2018

3Bear Field Services, LLC is applying to drill the Smith Ranch SWD-1 as a saltwater disposal well. Disposal will be in the Silurian and Devonian from 13,977' MD. 15477' MD. The well will be located 33.8 miles northwest from Monument, NM @ 358 ENL & 2362 FEL, Sec. 35, T 19S, R-33E, Lea County, NM. Maximum injection rate proposed is 26,000 bwpd with an avg. injection rate of 20,000 bwpd. Maximum injection pressure proposed is 2,340 psi. Interested parties must file objections or requests for hearing with the E.N.M.R.D.- Oil Conservation Division, 1220 South Saint Francis Dr., Santa Fe, NM 87505 within 15 days.

Additional information can be obtained by contacting: Jennifer Elrod, Chisholm Energy Operating, 801 Cherry St., Suite 1200-Unit 20, Fort Worth, TX 76102; (817)953-3728; #33066

67115144

00216020

BETTIE WATSON  
CHISHOLM ENERGY OPERATING, LLC  
801 CHERRY ST. STE 1200-UNIT 20  
FORT WORTH, TX 76102

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**OIL CONSERVATION DIVISION  
DISTRICT 1  
1625 N FRENCH DR  
HOBBS, NM 88240  
1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2008 75

2. Article Number (Transfer from service label)

**7018 1830 0000 8887 7998**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

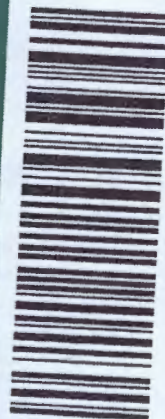
3. Service Type

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature                    | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

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**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$ \_\_\_\_\_  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage

\$

Total Pk

\$

Sent To

Street &

City, State

**OIL CONSERVATION DIVISION  
DISTRICT 1  
1625 N FRENCH DR  
HOBBS, NM 88240  
1774-SMITH RANCH SWD #1**

Postmark  
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**KENNETH SMITH INC  
267 SMITH RANCH ROAD  
HOBBS NM 88240**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2008 82

2. Article Number (Transfer from service label)

**7018 1830 0000 8887 8001**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes

☐ No

3. Service Type

☒ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™  
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Domestic Mail Only**

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**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

Postage

\$

Total

\$

Sen

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City

**KENNETH SMITH INC  
267 SMITH RANCH ROAD  
HOBBS NM 88240**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE  
**CERTIFIED MAIL®**



**7018 1830 0000 8887 8001  
7018 1830 0000 8887 8001**

Postmark  
Here



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**CIMAREX ENERGY CO OF COLORADO**  
**202 S CHEYENNE AVE, STE 1000**  
**TULSA OK 74103**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2008 99

2. Article Number (Transfer from sending label)

**7018 1830 0000 8887 8018**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

**CERTIFIED MAIL®**



7018 1830 0000 8887 8018  
 7018 1830 0000 8887 8018

**U.S. Postal Service™**

**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

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**CIMAREX ENERGY CO OF COLORADO**

**202 S CHEYENNE AVE, STE 1000**

**TULSA OK 74103**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark  
Here



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**COG OPERATING LLC  
550 W TEXAS  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 05

2. Article Number (Transfer from carrier label)

**7018 1830 0000 8887 8025**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

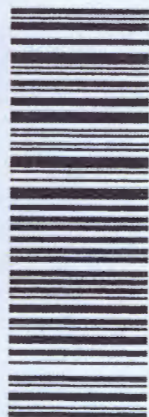
- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

**CERTIFIED MAIL®**



7018 1830 0000 8887 8025  
7018 1830 0000 8887 8025

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage

\$

Total

\$

Sen

Stre

City

**COG OPERATING LLC  
550 W TEXAS  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**MARSHALL & WINSTON INC  
PO BOX 50880  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 12

2. Article Number (Transfer from service label)

**7018 1830 0000 8887 8032**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) \$
  - ☐ Return Receipt (electronic) \$
  - ☐ Certified Mail Restricted Delivery \$
  - ☐ Adult Signature Required \$
  - ☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent

State

City

Postmark  
Here

**MARSHALL & WINSTON INC  
PO BOX 50880  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7018 1830 0000 8887 8032  
7018 1830 0000 8887 8032



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**SHACKLEFORD OIL CO  
PO BOX 10665  
MIDLAND TX 79702**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 29

2. Article Number (Transfer from service label)

**7018 1830 0000 8887 8049**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature                    | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

**CERTIFIED MAIL®**



7018 1830 0000 8887 8049  
7018 1830 0000 8887 8049

**U.S. Postal Service™  
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**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |
|--|----|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ |
| <input type="checkbox"/> Adult Signature Required            | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |

Postmark  
Here

Postage

\$

Total P

\$

Sent To

Street

City, St

**SHACKLEFORD OIL CO  
PO BOX 10665  
MIDLAND TX 79702**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**CHISHOLM ENERGY OPERATING LLC**  
**801 CHERRY STREET**  
**FT WORTH TX 76102**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 36

2. Article Number (Transfer from service label)

7018 1830 0000 8887 8056

PS Form 3811, July 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from Item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™  
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Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)☐ Return Receipt (electronic)☐ Certified Mail Restricted Delivery☐ Adult Signature Required☐ Adult Signature Restricted Delivery

Postage

\$

Total

\$

Sent

State

City

**CHISHOLM ENERGY OPERATING LLC**  
**801 CHERRY STREET**  
**FT WORTH TX 76102**

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®



7018 1830 0000 8887 8056

7018 1830 0000 8887 8056



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**BTA OIL PRODUCERS LLC  
104 S PECOS  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 43

2 Article Number (Transfer from envelope label)

**7018 1830 0000 8887 8063**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature                    | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |
|--|----|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ |
| <input type="checkbox"/> Adult Signature Required            | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |

Postage

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City

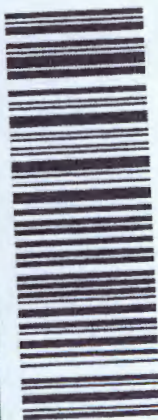
**BTA OIL PRODUCERS LLC  
104 S PECOS  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.  
**CERTIFIED MAIL®**



7018 1830 0000 8887 8063  
7018 1830 0000 8887 8063

Postmark  
Here



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

OCCIDENTAL PERMIAN LP  
5 E GREENWAY PLAZA #110  
HOUSTON TX 77046

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 50

## 2. Article Number (Transfer from service label)

7018 1830 0000 8887 8070

PS Form 3811, July 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

## 3. Service Type

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature                    | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

## Certified Mail Fee

\$

## Extra Services &amp; Fees (check box, add fee as appropriate)

- |  |    |
|--|----|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ |
| <input type="checkbox"/> Adult Signature Required            | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |

Postmark  
Here

## Postage

\$

## Total P

\$

## Sent To

Street:

## City, St

OCCIDENTAL PERMIAN LP  
5 E GREENWAY PLAZA #110  
HOUSTON TX 77046

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7018 1830 0000 8887 8070

7018 1830 0000 8887 8070



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

**MAGNUM HUNTER PRODUCTION INC**  
**202 S CHEYENNE AVE STE 1000**  
**TULSA OK 74103**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 67

## 2. Article Number (Transfer from service label)

**7018 1830 0000 8887 8087**

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

**X**

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
 OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



**7018 1830 0000 8887 8087**  
**7018 1830 0000 8887 8087**

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

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

## Certified Mail Fee

\$

## Extra Services &amp; Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

## Postage

\$

Total

\$

Sent

Street

City,

State

Zip

**MAGNUM HUNTER PRODUCTION INC**  
**202 S CHEYENNE AVE STE 1000**  
**TULSA OK 74103**

**1774-SMITH RANCH SWD #1**

Postmark  
 Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**UNION OIL CO OF CALIF  
PO BOX 2100  
HOUSTON TX 77210**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 74

2. Article Number (Transfer from service label)

**7018 1830 0000 8887 8094**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature                    | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7018 1830 0000 8887 8094  
7018 1830 0000 8887 8094

**U.S. Postal Service™  
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Extra Services & Fees (check box, add fee as appropriate)

- |  |    |
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| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ |
| <input type="checkbox"/> Adult Signature Required            | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |

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**UNION OIL CO OF CALIF  
PO BOX 2100  
HOUSTON TX 77210**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**MAGNUM HUNTER PRODUCTION INC  
600 N MARIENFELD ST, STE 600  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 81

2. Article Number (Transfer from service label)

**7018 1830 0000 8887 8100**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from Item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Adult Signature                     | <input type="checkbox"/> Priority Mail Express®                     |
| <input checked="" type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                     | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery             | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                            | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery        | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                                   |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)  |   |

Domestic Return Receipt

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**OFFICIAL USE**

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- |  |    |
|--|----|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ |
| <input type="checkbox"/> Adult Signature Required            | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |

Postmark  
Here

Postage

Total P

Sent To

Street a

City, St

**MAGNUM HUNTER PRODUCTION INC  
600 N MARIENFELD ST, STE 600  
MIDLAND TX 79701**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7018 1830 0000 8887 8100  
7018 1830 0000 8887 8100



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**DEVON ENERGY PRODUCTION CO. LP**  
**333 W SHERIDAN AVE**  
**OKLAHOMA CITY OK 73102**

**1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2009 98

2 Article Number (Transfer from service label)

**7018 1830 0000 8887 8117**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

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Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage

\$

Total

\$

Sent

Street

City, S

**DEVON ENERGY PRODUCTION CO. LP**  
**333 W SHERIDAN AVE**  
**OKLAHOMA CITY OK 73102**

**1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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7018 1830 0000 8887 8117  
 7018 1830 0000 8887 8117



# LONQUIST & CO. LLC

AUSTIN  
HOUSTON

PETROLEUM  
ENGINEERS

ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

BTA Oil Producers, LLC  
104 S Pecos  
Midland, TX 79701

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

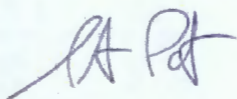
To Whom It May Concern:

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According to the New Mexico Oil Conservation Division, surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date in which this application was mailed to them.

Any questions should be directed towards 3Bear Field Services LLC's agent, Lonquist & Co., LLC.

Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)

# LONQUIST & CO. LLC

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ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Chisholm Energy Operating, LLC  
801 Cherry Street  
Fort Worth, TX 76102

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

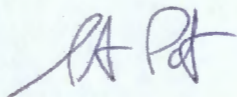
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



# LONQUIST & CO. LLC

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[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Cimarex Energy Co. of Colorado  
202 S. Cheyenne Ave. Suite 1000  
Tulsa, OK 74102

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

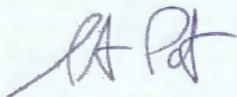
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)

# LONQUIST & CO. LLC

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ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

COG Operating LLC  
550 W Texas  
Midland, TX 79701

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

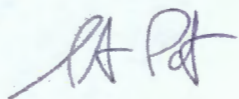
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



# LONQUIST & CO. LLC

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WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Devon Energy Production Company, LP  
333 W. Sheridan Avenue  
Oklahoma City, OK 73102

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

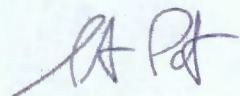
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Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)

# LONQUIST & CO. LLC

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WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Kenneth Smith Inc.  
207 Smith Ranch Rd.  
Hobbs, NM 88240

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

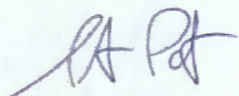
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



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ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Magnum Hunter Production Inc.  
600 N Marienfeld Street, Suite 600  
Midland, TX 79701

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

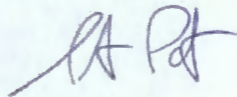
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)

# LONQUIST & CO. LLC

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ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Magnum Hunter Production Inc  
202 S. Cheyenne Ave. Suite 1000  
Tulsa, OK 74102

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

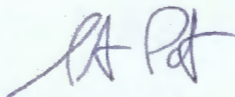
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



# LONQUIST & CO. LLC

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HOUSTON

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ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Marshall & Winston Inc.  
PO Box 50880  
Midland, TX 79701

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

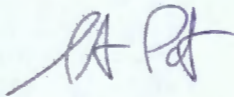
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)

# LONQUIST & CO. LLC

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HOUSTON

PETROLEUM  
ENGINEERS

ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Occidental Permian LP  
5 E Greenway Plaza #110  
Houston, TX 77046

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

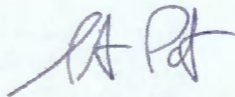
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



# LONQUIST & CO. LLC

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HOUSTON

PETROLEUM  
ENGINEERS

ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

OIL CONSERVATION DIVISION  
DISTRICT I  
1625 N FRENCH DRIVE  
HOBBS, NM 88240

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

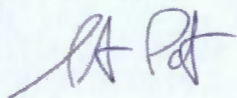
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)

# LONQUIST & CO. LLC

AUSTIN  
HOUSTON

PETROLEUM  
ENGINEERS

ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Shackleford Oil Co.  
PO Box 10665  
Midland, TX 79702

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

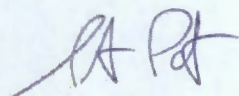
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



# LONQUIST & CO. LLC

AUSTIN  
HOUSTON

PETROLEUM  
ENGINEERS

ENERGY  
ADVISORS

WICHITA  
CALGARY

[www.lonquist.com](http://www.lonquist.com)

January 24, 2019

Union Oil Co. of Calif  
PO Box 2100  
Houston, TX 77210

**Subject: Smith Ranch SWD No. 1 Authorization to Inject**

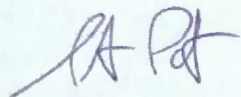
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Regards,



Stephen L. Pattee, P.G.  
Regulatory Manager  
Lonquist & Co., LLC

(512) 600-1774  
[steve@lonquist.com](mailto:steve@lonquist.com)



APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage  
Application qualifies for administrative approval? X Yes No
- II. OPERATOR: 3Bear Field Service, LLC  
ADDRESS: 415 W. Wall St., Suite 1212  
CONTACT PARTY: Kevin Burns PHONE: 432-686-2973
- 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 X 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 geologic data on the injection zone including appropriate lithologic detail, geologic 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 sources 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 sources 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: Ramona Hovey TITLE: Consulting Engineer – Agent for 3Bear Field Service  
SIGNATURE: Ramona Hovey DATE: 1/24/2019  
E-MAIL ADDRESS: ramona@lonquist.com
- \* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances 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 the 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, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

---

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

Side 1

## INJECTION WELL DATA SHEET

OPERATOR: 3Bear Field Services, LLC

WELL NAME & NUMBER: Smith Ranch SWD No. 1

WELL LOCATION: 358 FNL 2,362 FEL  
FOOTAGE LOCATION

A  
UNIT LETTER

35  
SECTION

19S  
TOWNSHIP

33E  
RANGE

### WELLBORE SCHEMATIC

### WELL CONSTRUCTION DATA

#### Surface Casing

Hole Size: 26.000"

Casing Size: 20.00"

Cemented with: 2,515 sx.

or \_\_\_\_\_ ft<sup>3</sup>

Top of Cement: surface

Method Determined: circulation

#### 1<sup>st</sup> Intermediate Casing

Hole Size: 17.500"

Casing Size: 13.375"

Cemented with: 2,140 sx.

or \_\_\_\_\_ ft<sup>3</sup>

Top of Cement: surface

Method Determined: circulation

#### 2<sup>nd</sup> Intermediate Casing

Hole Size: 12.250"

Casing Size: 9.625"

Cemented with: 2,555 sx.

or \_\_\_\_\_ ft<sup>3</sup>

Top of Cement: surface

Method Determined: circulation

#### Production Liner

Hole Size: 8.750"

Casing Size: 7.625"

Cemented with: 365 sx.

or \_\_\_\_\_ ft<sup>3</sup>

Top of Cement: 10,630'

Method Determined: calculation

Total Depth: 15,800'

#### Injection Interval

14,471' feet to 15,800' feet

(Open Hole)



**INJECTION WELL DATA SHEET**

Tubing Size: 5.5", 20 lb/ft, HCN-80, BTC from 0' - 14,421'

Lining Material: Duoline

Type of Packer: 7-5/8" X 5-1/2" Permanent Packer with High Temp Elastomer and Full Inconel 925 trim

Packer Setting Depth: 14,421'

Other Type of Tubing/Casing Seal (if applicable): \_\_\_\_\_

Additional Data

1. Is this a new well drilled for injection?   X   Yes        No

If no, for what purpose was the well originally drilled?

\_\_\_\_\_

2. Name of the Injection Formation: Devonian, Fusselman, Montoya

3. Name of Field or Pool (if applicable): SWD; Devonian-Silurian 97869

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used.

No, new drill.

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:

Delaware: 5,350'

Bone Spring: 8,120'

Wolfcamp: 10,800'

Strawn: 12,060'

Atoka: 12,330'

**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

**State of New Mexico**  
**Energy Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 South St. Francis Dr.**  
**Santa Fe, NM 87505**

Form C-101  
Revised July 18, 2013

☐ AMENDED REPORT

*F/P*

**NOE-3 OCD**  
**NOV 29 2018**  
**RECEIVED**

**APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE**

<sup>1</sup> Operator Name and Address 3BEAR FIELD SERVICES, LLC 1512 LARIMER ST., SUITE 540 DENVER, CO 80202		<sup>4</sup> OGRID Number 372603
<sup>3</sup> Property Code <i>722 248</i>		<sup>5</sup> API Number <i>30-025-44390</i>
<sup>2</sup> Property Name SMITH RANCH SWD		<sup>6</sup> Well No. 1

**7. Surface Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
A	35	19S	33E		358	NORTH	2362	EAST	LEA

**8. Proposed Bottom Hole Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

**9. Pool Information**

Pool Name SWD; DEVONIAN-SILURIAN	Pool Code 97869
-------------------------------------	--------------------

**Additional Well Information**

<sup>11</sup> Work Type N	<sup>12</sup> Well Type S	<sup>13</sup> Cable/Rotary R	<sup>14</sup> Lease Type <i>S F</i>	<sup>15</sup> Ground Level Elevation <i>3253 3595</i>
<sup>16</sup> Multiple YES	<sup>17</sup> Proposed Depth 15,800'	<sup>18</sup> Formation SILURO-DEVONIAN	<sup>19</sup> Contractor JDC DRILLING	<sup>20</sup> Spud Date UPON APPROVAL OF C-108
Depth to Ground water 110'		Distance from nearest fresh water well 2963'		Distance to nearest surface water 11,600 (LAGUNA TONTO)

☒ We will be using a closed-loop system in lieu of lined pits

**21. Proposed Casing and Cement Program**

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
SURF	26"	20.0"	94# J-55	1400	2515	0
INTER	17.5	13.375"	54.5# J-55	3050	2140	0
<i>PROD</i> INTER-2	12.25"	9.625"	40# L-80 HC	10880	2555	0

**Casing/Cement Program: Additional Comments**

LINER/8.75"/7.625"/39# P-110 UFJ/14471/365 SXS/TOC @ 10630'; OPEN HOLE FROM 1400'-15800'; PLEASE SEE ATTACHED WBD
---

**22. Proposed Blowout Prevention Program**

Type	Working Pressure	Test Pressure	Manufacturer
	SEE ATTACHMENT		

<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable. Signature: <i>Jennifer Elrod</i>		OIL CONSERVATION DIVISION Approved By: <i>[Signature]</i> Title: <b>Petroleum Engineer</b>	
Printed name: JENNIFER ELROD		Approved Date: <i>12/04/18</i> Expiration Date: <i>12/04/20</i>	
Title: SR. REGULATORY TECH			
E-mail Address: jelrod@chisholmenenergy.com			
Date: 11/29/2018	Phone: 817-953-3728	Conditions of Approval Attached	

**See Attached**  
**Conditions of Approval**



District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
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District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

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

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

NOV 29 2018  
RECEIVED

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number <b>30-025-45390</b>	<sup>2</sup> Pool Code <b>97869</b>	<sup>3</sup> Pool Name <b>SILURO-DEVONIAN</b>
<sup>4</sup> Property Code <b>322448</b>	<sup>5</sup> Property Name <b>SMITH RANCH SWD</b>	<sup>6</sup> Well Number <b>1</b>
<sup>7</sup> OGRID No. <b>372603</b>	<sup>8</sup> Operator Name <b>3BEAR FIELD SERVICES, LLC</b>	<sup>9</sup> Elevation <b>3595'</b>

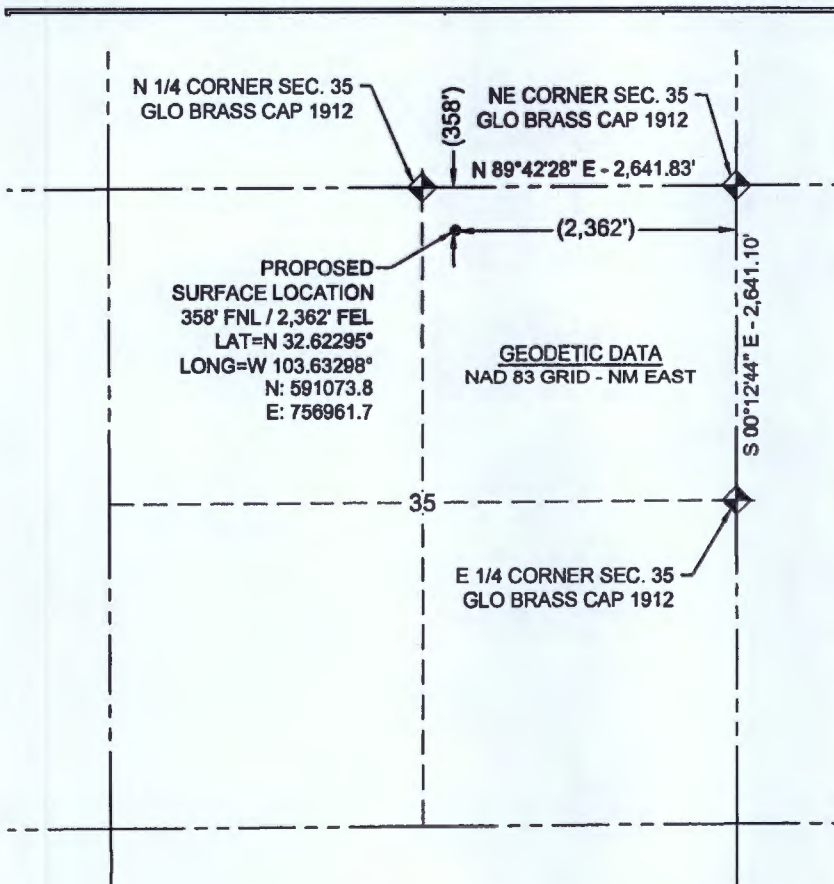
" Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
NE 1/4 (A)	35	19S	33E		358	NORTH	2,362	EAST	LEA

" 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
<sup>12</sup> Dedicated Acres	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.						

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.



" OPERATOR CERTIFICATION

I hereby certify that the information contained hereto 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.

*Jennifer Elrod* 11/29/2018  
Signature Date

JENNIFER ELROD

Printed Name

jelrod@chisholmenergy.com

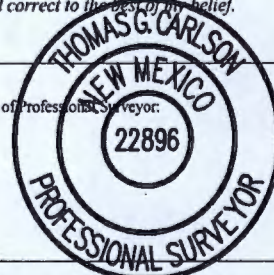
E-mail Address

" SURVEYOR CERTIFICATION

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.

6/02/18  
Date of Survey

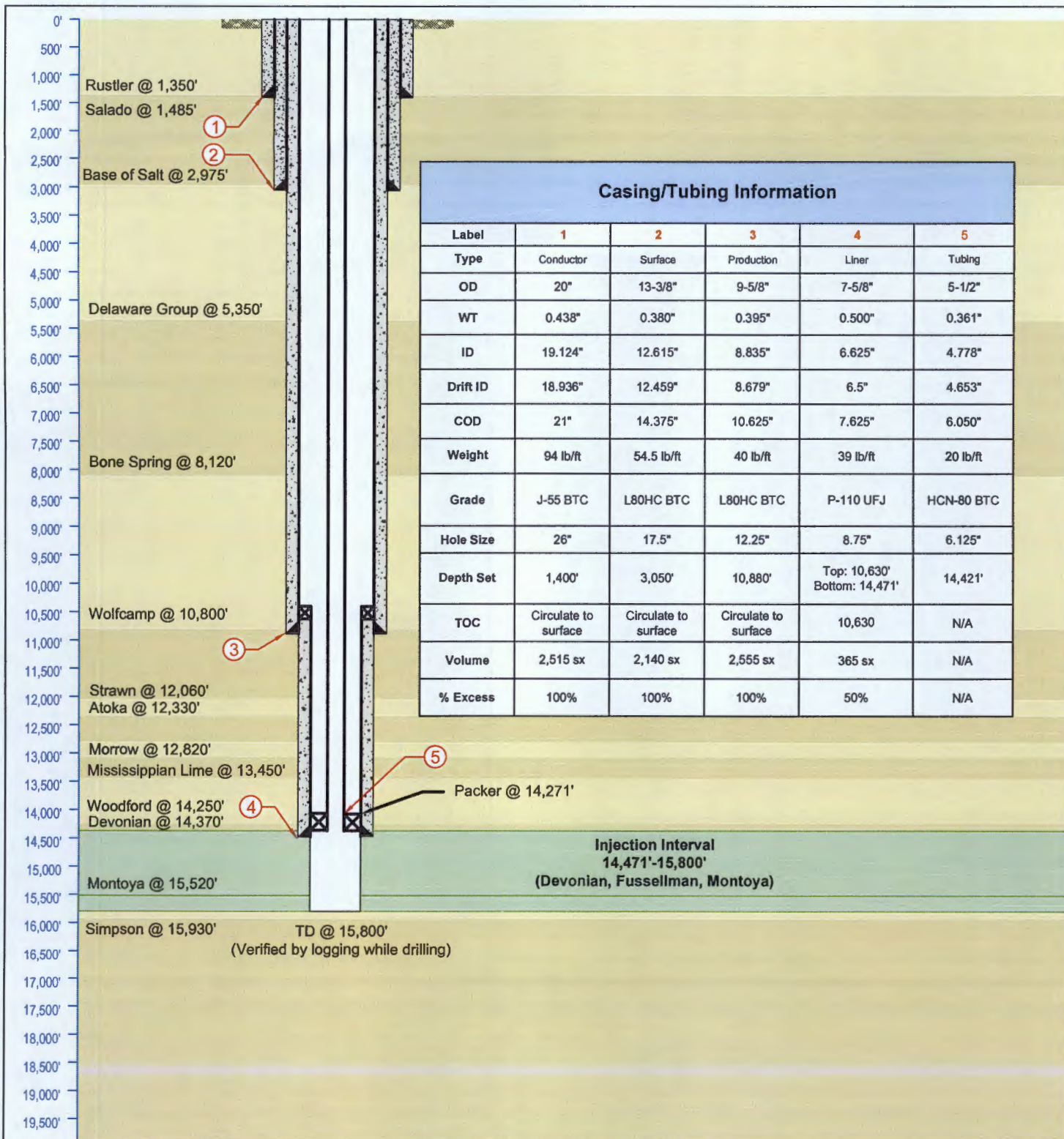
Signature and Seal of Professional Surveyor:



22896

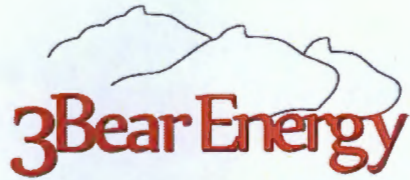
Certificate Number





<b>LONQUIST &amp; CO. LLC</b> <b>PETROLEUM ENGINEERS</b> <b>ENERGY ADVISORS</b> <b>HOUSTON   CALGARY</b> <b>AUSTIN   WICHITA   DENVER</b>	3Bear Field Services, LLC		Smith Ranch SWD No. 1	
	Country: USA		State/Province: New Mexico	County/Parish: Lea
	Location:		Site: 358 FNL, 2,362 FEL	Survey: S35-T19S-R33E
	API No: N/A		Field:	Well Type/Status: SWD
	Texas License F-9147		Project No:	Date: 01/23/2019
12912 Hill Country Blvd. Ste F-200 Austin, Texas 78738 Tel: 512.732.9812 Fax: 512.732.9816	NMOCD District No: 1		Reviewed:	Approved:
	Drawn: TFM		Notes:	
	Rev No: 1			





3Bear Field Services, LLC

Smith Ranch SWD No. 1

**FORM C-108 Supplemental Information**

**III. Well Data**

**A. Wellbore Information**

1.

Well information	
Lease Name	Smith Ranch SWD
Well No.	1
Location	S-35 T-19S R-33E
Footage Location	358' FNL & 2,362' FEL

2.

**a. Wellbore Description**

Casing Information				
Type	Surface	Intermediate	Production	Liner
OD	20"	13.375"	9.625"	7.625"
WT	0.438"	0.38"	0.395"	0.500"
ID	19.124"	12.615"	8.835"	6.625"
Drift ID	18.936"	12.459"	8.679"	6.500"
COD	21"	14.375"	10.625"	7.625"
Weight	94 lb/ft	54.5 lb/ft	40 lb/ft	39 lb/ft
Grade	J-55 BTC	L80HC BTC	L80HC BTC	P-110 UFJ
Hole Size	26"	17.5"	12.25"	8.75"
Depth Set	1,400'	3,050'	10,880'	10,630'-14,471'

b. Cementing Program

Cement Information				
Casing String	Conductor	Intermediate	Intermediate 2	Liner
Lead Cement	Class C	Class C	Class H	
Lead Cement Volume	1,620 sks	1,485 sks	1,575 sks	
Lead Cement Density	12.2 ppg	12.7 ppg	12.7 ppg	
Tail Cement	Class C	Class C	Class H	Class H
Tail Cement Volume	895 sks	655 sks	980 sks	365 sks
Tail Cement Density	14.8 ppg	14.8 ppg	14.5 ppg	14.5 ppg
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	10,630'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Logged

3. Tubing Description

Tubing Information	
OD	5.5"
WT	0.361"
ID	4.778"
Drift ID	4.653
COD	6.050"
Weight	20 lb/ft
Grade	HCN-80 BTC
Depth Set	0-14,421'

Tubing will be lined with Duoline.

4. Packer Description

7-5/8" x 5-1/2" TCPC Permanent Packer with High Temp Elastomer and Full Inconel 925 trim

B. Completion Information

1. Injection Formation: Devonian, Silurian, Fusselman, Montoya



2. Gross Injection Interval: 14,471'-15,800'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'

#### VI. Area of Review

No wells within the area of review penetrate the proposed injection zone.

#### VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD  
Maximum Volume: 25,000 BPD

2. Closed System
3. Anticipated Injection Pressure:

Average Injection Pressure: 2,156 PSI (surface pressure)  
Maximum Injection Pressure: 2,874 PSI (surface pressure)

4. The injection fluid is to be locally produced water. It is expected that the source water will predominantly be from the Bone Spring and Wolfcamp formations. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Spring, Wolfcamp, Artesia, Pennsylvanian, San Andreas, and Delaware formations.
5. The disposal interval is non-productive. No water samples are available from the surrounding area.

## VIII. Geological Data

### Devonian Formation Lithology:

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation include two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a tremendous Salt Water Disposal horizon.

### Fusselman Formation Lithology:

The Silurian/Ordovician Fusselman Formation is stratigraphically below the Wristen Group and is above and separated from the Montoya Formation by the Sylvan Shale. The Sylvan Shale is the lower confining layer for the proposed Smith Ranch SWD No. 1 well. Fusselman facies include a laminated skeletal wackestone in the upper part and a buildup complex in the lower part composed of ooid and bryozoan grainstones. These grainstones can also be potentially prolific zones for disposal.

### Montoya Formation Lithology:

The Montoya Group of Late Ordovician age unconformably overlies the Simpson Group. The Montoya is composed of light gray to medium-dark gray, fine- to medium-crystalline, calcareous dolomite, some units of which are interbedded with shale or dark-gray limestone and some units of which contain white to very light-gray chert. The Montoya carbonate limestone dolomite sequence is dense, impermeable, and non-porous.



**A. Injection Zone: Siluro-Devonian Formation**

<b>Formation</b>	<b>Depth</b>
Rustler	1,350'
Salado	1,485'
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'
Morrow	12,820'
Barnett	13,070'
Mississippian Lime	13,450'
Woodford	14,250'
Devonian	14,370'
Montoya	15,520'
Simpson	15,930'

**B. Underground Sources of Drinking Water**

One water well exists within one mile of the proposed well. Across the area, fresh water wells are usually drilled between 50' and 850' in depth. The Rustler is known to exist in this general area and may also be another USDW and will be protected through the top of the Salado Formation at 1,485' by setting surface casing at 1,400' and intermediate casing at 3,050' below the Salado.

**IX. Proposed Stimulation Program**

No stimulation program planned.

**X. Logging and Test Data on the Well**

There are no logs or test data on the well. During the process of drilling and completion resistivity, gamma ray, and density logs will be run.

**XI. Chemical Analysis of Fresh Water Wells**

Attached is a map of the one (1) water well that exist within one mile of the well location. Samples from the well have been obtained and analysis results will be provided as soon as possible. A Water Right Summary from the New Mexico Office of the State Engineer is attached for water well CP-00658-POD1.