

ABOVE THIS LINE FOR DIVISION USE ONLY

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



ADMINISTRATIVE APPLICATION CHECKLIST

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

Application Acronyms:

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

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

[A] Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP ☐ SD

Check One Only for [B] or [C]

[B] Commingling - Storage - Measurement

☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM

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

☐ WFX ☐ PMX ☒ SWD ☐ IPI ☐ EOR ☐ PPR

[D] Other: Specify _____

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

[A] ☐ Working, Royalty or Overriding Royalty Interest Owners

[B] ☐ Offset Operators, Leaseholders or Surface Owner

[C] ☐ Application is One Which Requires Published Legal Notice

[D] ☐ Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office

[E] ☐ For all of the above, Proof of Notification or Publication is Attached, and/or,

[F] ☐ Waivers are Attached

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

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

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

Print or Type Name _____ Signature _____ Title _____ Date _____
 e-mail Address _____

Handwritten notes and stamps:
 - Nav 5 1/2 CSE
 - CIRC CMT or KWH/CBL
 - SWAB Test
 - AX Analyze Sample
 - Report Shows Test Results
 - OLD 1/2
 - 1022PSC (circled)



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

INTEROFFICE MEMO

November 4, 2005

RE: Mesquite SWD, Inc: Application to convert the Catclaw Draw # 2 well, located in Unit H (2000' FNL & 890' FEL) of Section 18, Township 21 South Range 26 East Eddy County, New Mexico. API # 30-015-24065

Dear Mr. Jones

In regards to the above captioned well in my review of with Mesquite SWD, Inc application to convert said well to a SWD, I provide the following for your information of review:

The geological tops of this well bore are:

~~Seven Rivers.~~

Capitan Massive Reef

Delaware Sand

Bone Spring limestone

Bone Spring sand

2nd Bone Spring sand

3rd Bone Spring sand

Wolfcamp

Pennsylvanian

Strawn

Atoka

Morrow limestone

Morrow clastics

Surface

310'

1982'

4475'

5513'

6457'

7642'

8071

8812'

9335'

9900'

10238'

10430'

OSG PARTED?

5110 TO 11000'
6580' BOTTOM

In the area of review and beyond concentrating on areas of production starting at the surface down through to the base of the Wolfcamp formation, I find (2) productive formations from our records (designated pools). They are the Catclaw Draw; Delaware, East Oil Pool, which part of the pool boundary lies directly to the northwest and northeast of this well bore in Section 7, Township 21 South, Range 26 East.

The other pool produces out of the Wolfcamp. Part of the pool boundary from the Catclaw Draw # 2 well is more than a mile to the southeast in Section 18, Township 21 South, Range 26 East.

As you can see from the submitted application, there are a number of water wells in the AOR.

Please look at our well files and read the hand written note about setting the surface casing.

I do not know if this will have any bearing on your review/approval.

(cont)
(page 2)

As you are probably aware, Mesquite SWD, Inc, has some typographical errors in regards to proposed perfs in the Bone Spring. You can find this on the 4th page of the application in item: (B) "Other well information" and their proposed well bore diagram in the proposed plan box. I am somewhat confused about the casing parting at 254' from C-103 report dated 3/24/1 1982. Will there be any special requirements that the integrity of the casing is sound?

If you have any questions or need additional information, please give me a call or e-mail.

Bryan G. Arrant
PES-Artesia

LEE ENGINEERING

P.O. BOX 10523, MIDLAND, TX 79702 (432) 682-1251

2005 OCT 31 PM 2 55

October 27, 2005

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

Attn: Mr. Will Jones

Re: Request for Administrative Approval
For Water Disposal Well.
Catchlaw Draw #2
API # 30-015-24065
Section 18H, T-21-S, and R-26-E
Eddy County, New Mexico

Dear Mr. Jones:

Please find attached a Form C-108 requesting approval to utilize the Catchlaw Draw #2 as a salt-water disposal well. If all attachments are satisfactory and no offset Owners object, Mesquite SWD, Inc. respectfully requests approval be granted administratively.

Mesquite SWD, Inc. requests permission to inject water into the Bone Spring Formation. The Bone Spring intervals to be injected into are 5110-30, 5510-5690, 6515-40 & 6560-80. The 2 7/8" cement lined injection tubing will be set at 5075' with a plastic coated AD-1 Packer.

The maximum anticipated injection rate is 5000 BWPD with an injection pressure not to exceed 1020 PSI. If injection pressures need to be increased, a State witnessed step-rate test will be performed.

If you have any questions, or if I can be of any assistance please do not hesitate to me at (432)-682-1251. My e-mail address is: robertlee5@att.net.

Sincerely,



Robert Lee

CATCLAW DRAW #2

SALT WATER DISPOSAL WELL

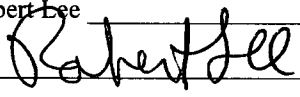
OCD FORM C-108

OPERATOR

MESQUITE SWD, INC.

October 2005

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: _____ Secondary Recovery _____ Pressure Maintenance ☒ Disposal _____ Storage
Application qualifies for administrative approval? ☒ Yes _____ No
- II. OPERATOR: _____ Mesquite SWD Inc. _____
ADDRESS: _____ P. O. Box 1479 Carlsbad, NM 88220 _____
CONTACT PARTY: _____ Mr. Clay Wilson _____ PHONE: _____ 505-706-1869 _____
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? _____ Yes ☒ No
If yes, give the Division order number authorizing the project: _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate 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: _____ Robert Lee _____ TITLE: _____ Consulting Engineer _____
SIGNATURE: _____  _____ DATE: _____ October 14, 2005 _____
E-MAIL ADDRESS: _____ robertlee5@att.net _____
- * 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.

CATCLAW DRAW #2
APPLICATION FOR INJECTION
NMOCD Form C-108 Section III

III. Data on injection well(s)

A. Injection well information (see attached schematic)

Tabular data

1. Lease: Catclaw Draw
Well No: 2
Location: 2000' FNL & 890' FWL,
Section 18
T-21-S, R-26-E
Eddy County, NM
2. Casing: 13 3/8" surface csg. @ 520', cemented w/720 sx. TOC @ surface, circulated.
11", intermediate casing @ 2250' cemented w/ 1100 sx. TOC @ surface, Circulated
4 1/2" production casing, @ 10860' cemented w/ 735 sx. cement. The production casing has been cut and pulled from 7570' when the well was plugged.
3. Injection tubing: + or - 91 jts 2 7/8", 4.6 lb/ft, J-55 Rice Duoline internally cement lined tubing set @ 2225'.
4. Packer: Plastic coated AD-1 Packer set at 2225'.

B. Other well information

1. Injection formation: Bone Spring
Field: NA
2. The injection intervals will be from 5110-6880 The well is currently plugged. It is proposed to drill out plugs to 7606' and complete the Bone Spring. The Bone Spring intervals to be completed will be at 5110-30, 5510-5690, 6515-40 & 6560-80.
3. This well was drilled as Morrow test in 1981. It was completed in the Morrow from 10604-10780. When the well was plugged the 4 1/2" casing was cut and pulled at 7570'.
4. There are no other perfed or tested intervals in this well. We intend to add perfs as listed in item #2.
5. There are no other producers within in area of review of the Catclaw Draw #2.

CATCLAW DRAW #2

CONVERT TO INJECTION

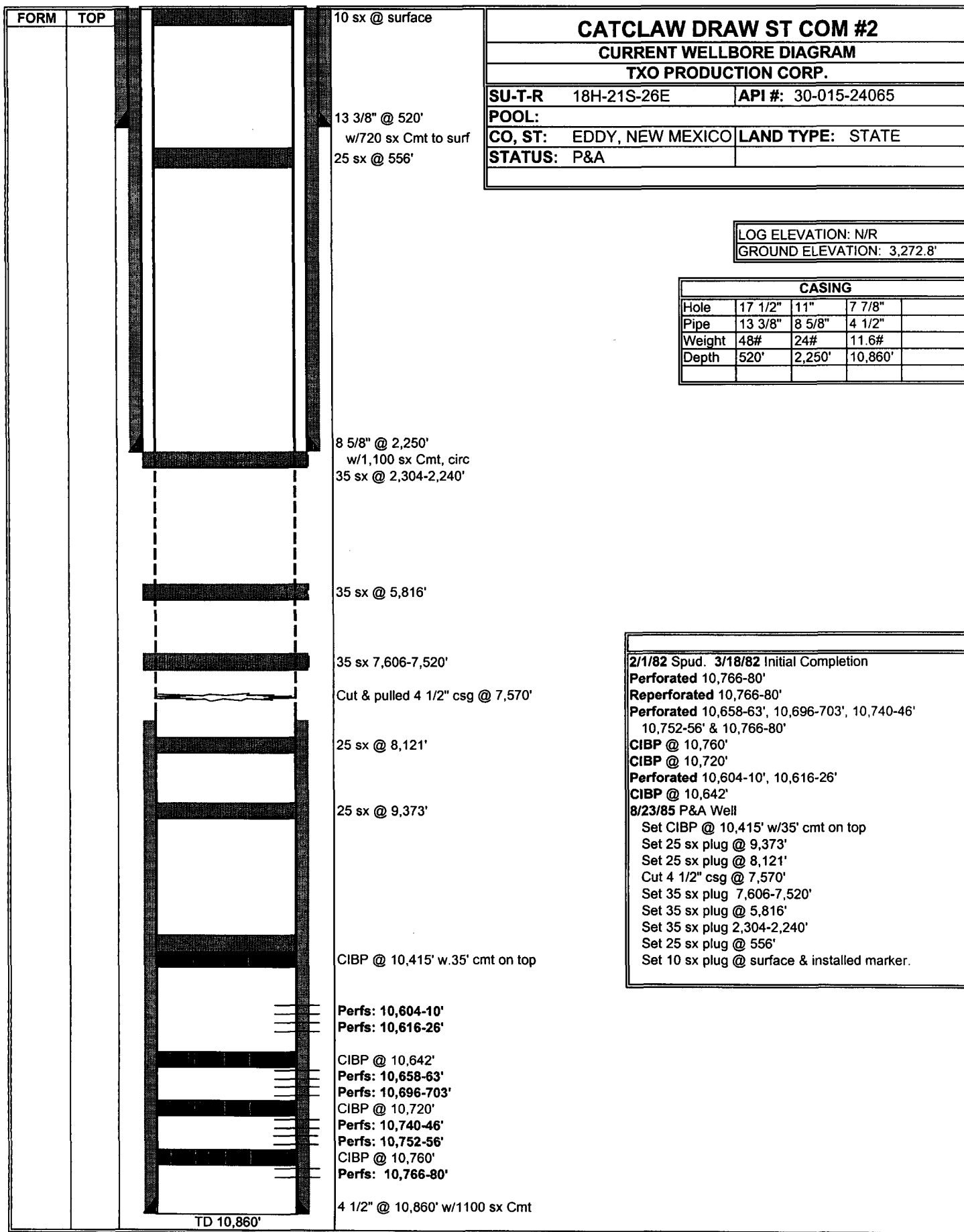
NMOCD Form C-108 Sections VII thru XII

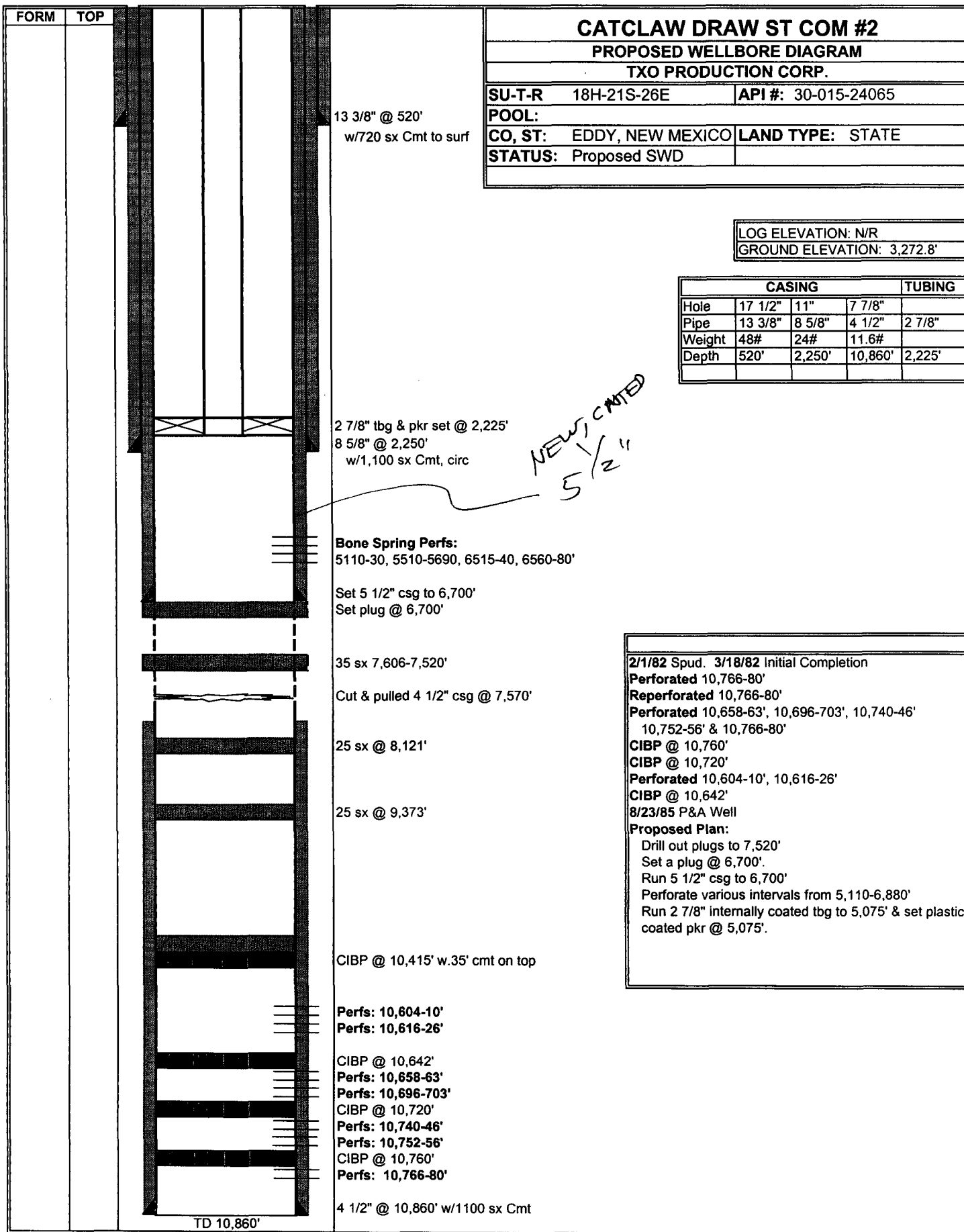
VII. Data on proposed operation.

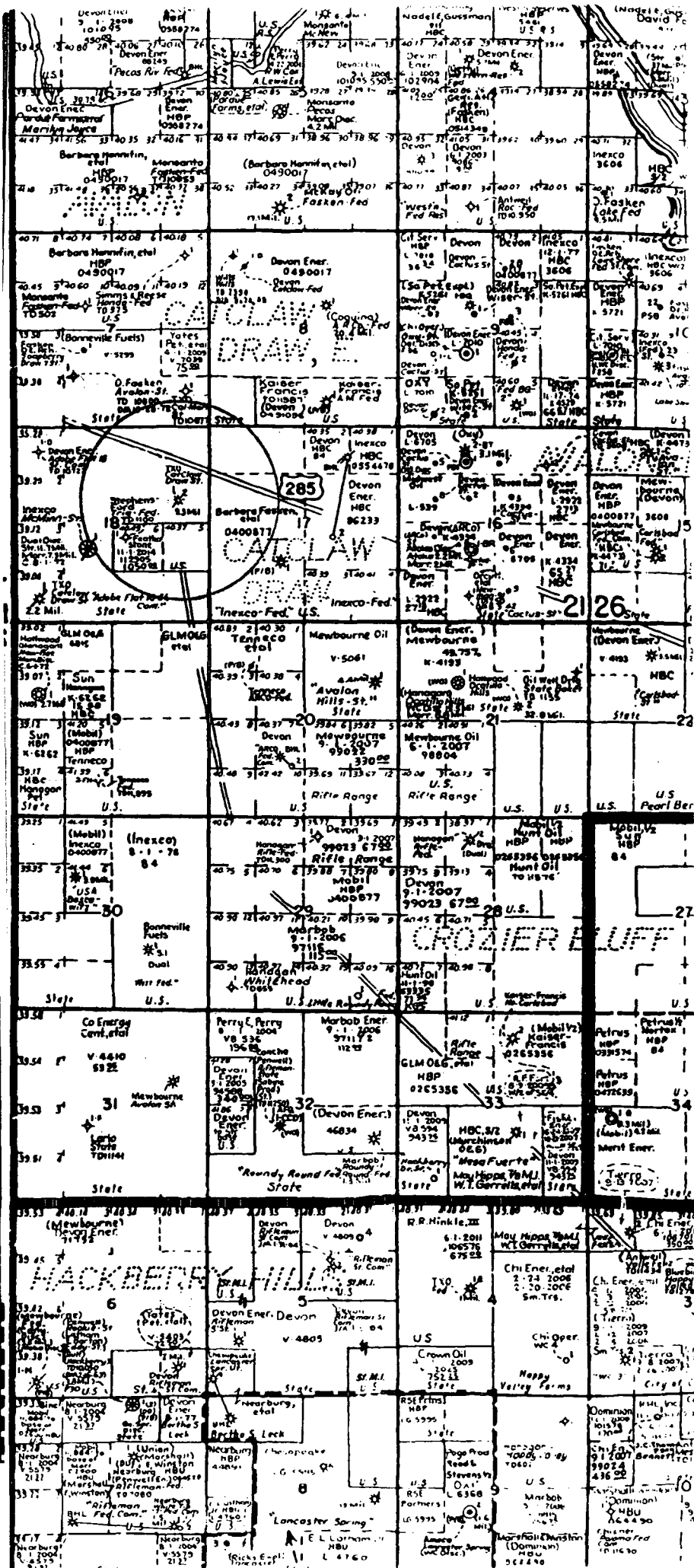
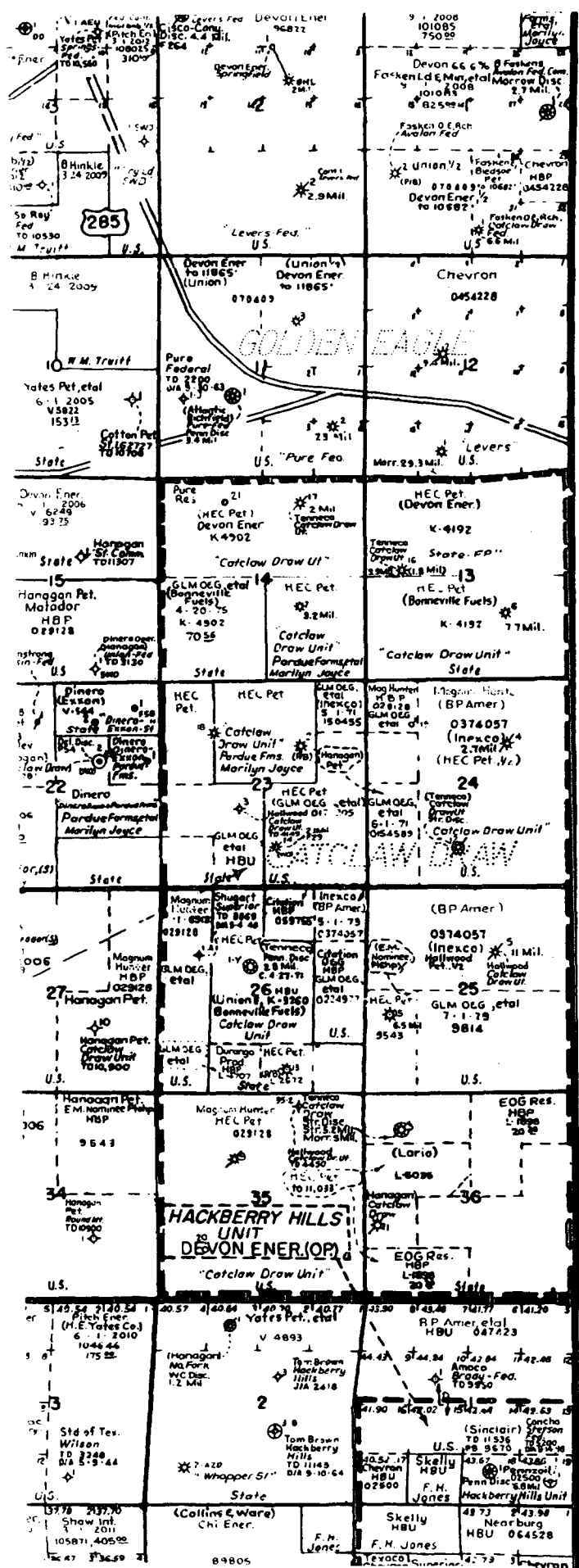
1. Proposed average injection rate: 1000 BWPD per well
Proposed maximum injection rate: 5000 BWPD per well
2. The system will be a closed system.
3. Proposed average injection pressure: 900 PSI
Proposed maximum injection pressure: 1020 PSI (This is based on a .2 psi/ft gradient)
4. The proposed injection fluid is produced water from other leases. Water analysis of these waters is not available.
5. There is no production from these intervals within 1 mile of this well.

See BRYAN'S NOTE

- VIII. The proposed injection interval is located in the Bone Spring formation. The Bone Spring is a Permian age reservoir that is about 4100' thick in this area. The top of the Bone Spring is at 4080' and the base is at 8185'. The intervals to be injected into are 5110-30, 5510-5690, 6515-40 & 6560-80. There are several fresh water wells within one mile of the proposed salt-water disposal well based on the attached information provided by the State Engineer.
- IX. The injection zone will be perforated intervals in the Bone Spring at 5110-30, 5510-5690, 6515-40 & 6560-80. The injection string will be 2 7/8" cement lined tubing set at 5075' with a plastic coated AD-1 packer. No stimulation is planned for the injection interval.
- X. Logs have been submitted to the OCD.
- XI. There are several fresh water wells within one mile of the proposed conversion. The information for this area as provide by the State Engineer is attached. The depth of wells within 1 mile of the proposed injection well is above 400'.
- XII. An examination of this area has determined there are no open faults or other hydrologic connection between the disposal zone and any underground drinking water. These shallow formations are generally not faulted. The casing and cement should isolate the migration of salt water up the borehole. Three strings of casing will protect the ground water at 400' and above.







Mesquite SWD, Inc. C-108 ITEM VI Tabulation of Wells Within the Area of Review

	OPERATOR	CURRENT WELL NAME	API #	LOCN	S-T-R T-21-S R-26-E	STATUS	SPUD DATE	COMP DATE	TD	PBTD	ZONE	CASING PROGRAM	TOC (Calc.)	COMP. INTERVAL	TRTMT.	IP
1	Mesquite SWD Inc	Catchaw Draw #2	24065	2000 FNL 890 FEL.	Section 18	P & A	2/1/1982	3/18/1982	10860	NA	Morrow	13 3/8" @ 520' w/ 720 sx 11" @ 2250' w/ 1100 sx 4 1/2" @ 10860' w/ 735 sx	Surf Circ 7665	10604-10 10616-26	1500 Gal Acid	2400 MCFD

New Mexico Office of the State Engineer
Well Reports and Downloads

Township: Range: Sections:

NAD27 X: Y: Zone: Search Radius:

County: Basin: Number: Suffix:

Owner Name: (First) (Last) ☐ Non-Domestic ☐ Domestic ☒ All

WATER COLUMN REPORT 09/09/2005

(quarters are 1=NW 2=NE 3=SW 4=SE)
 (quarters are biggest to smallest)

Well Number	Tws	Rng	Sec	q	q	q	Zone	X	Y	Depth Well	Depth Water	Water (in feet) Column
C 02632	21S	26E	07	4	3	1				247	66	181
C 02161	21S	26E	08							202	150	52
C 01878	21S	26E	08							245	165	80
C 02498	21S	26E	08							274	184	90
C 02188	21S	26E	08	1						182	155	27
C 02159	21S	26E	08	1	2	2				205	168	37
C 02893	21S	26E	08	1	3	3				225	175	50
C 03045	21S	26E	08	1	4	4				250	135	115
C 02681	21S	26E	08	2	3					200	160	40
C 02620	21S	26E	08	2	3	4				203	152	51
C 02228	21S	26E	08	3						250	168	82
C 02301	21S	26E	08	3	1					240	160	80
C 01991	21S	26E	08	3	2	2				235	160	75
C 02611	21S	26E	08	3	2	2				250	215	35
C 02616	21S	26E	08	3	4					250	180	70
C 01927	21S	26E	08	3	4					270	165	105
C 02443	21S	26E	08	3	4	1				278	178	100
C 02361	21S	26E	08	3	4	2				250	150	100
C 02077	21S	26E	08	3	4	3				227	185	42
C 01937	21S	26E	08	4						256	190	66
C 02157	21S	26E	08	4						218	150	68
C 02237	21S	26E	08	4						232		
C 02818	21S	26E	08	4	1	1				270		
C 02490	21S	26E	08	4	1	3				235	160	75
C 03042	21S	26E	08	4	2	1				215	170	45
C 02659	21S	26E	08	4	2	1				250	170	80
C 02427	21S	26E	08	4	2	2				200	160	40
C 02577	21S	26E	08	4	2	3				196	160	36
C 02649	21S	26E	08	4	2	4				200		
C 02482	21S	26E	08	4	3					287	185	102
C 01859	21S	26E	08	4	3					201	165	36
C 02396	21S	26E	08	4	3	1				207	80	127
C 03077	21S	26E	08	4	3	2				300	100	200
C 01978	21S	26E	08	4	3	2				215	150	65
C 02650	21S	26E	08	4	3	4				260	190	70
C 02172	21S	26E	08	4	4					200	150	50
C 02660	21S	26E	08	4	4					200		
C 02162	21S	26E	08	4	4					202	150	52
C 01958	21S	26E	08	4	4					180	155	25
C 00524	21S	26E	08	4	4	1				175		
C 02601	21S	26E	17	1						340	210	130
C 03019	21S	26E	17	1	1	1				350		
C 01995	21S	26E	17	1	1	4				280	250	30
C 01949	21S	26E	17	1	2					250		
C 01845	21S	26E	17	1	2					219	180	39
C 01946	21S	26E	17	1	2					150		

<u>C 02093</u>	21S	26E	17	1	2	1	210	179	31
<u>C 02140</u>	21S	26E	17	1	2	2	235	203	32
<u>C 02130</u>	21S	26E	17	1	2	2	245	225	20
<u>C 01726</u>	21S	26E	17	2			211	180	31
<u>C 01821</u>	21S	26E	17	2	2		305	190	115
<u>C 01807</u>	21S	26E	17	2	3	1	300	180	120
<u>C 01643</u>	21S	26E	17	2	3	2	330	310	20
<u>C 01734</u>	21S	26E	17	2	3	2	216	182	34
<u>C 01940</u>	21S	26E	17	2	4		212	182	30
<u>C 02137</u>	21S	26E	17	2	4		217	178	39
<u>C 01817</u>	21S	26E	17	2	4		215	195	20
<u>C 01840</u>	21S	26E	17	2	4	1	360	201	159
<u>C 01736</u>	21S	26E	17	3	2	4	212	178	34
<u>C 01191</u>	21S	26E	17	3	4	4	250	175	75
<u>C 01191 CLW296447</u>	21S	26E	17	4	1	3	190	175	15
<u>C 01858</u>	21S	26E	18	3	3	3	360	240	120
<u>C 02904</u>	21S	26E	19	4	2	4	500		
<u>FS 02443</u>	21S	26E	08	3	4	1	278	178	100
<u>FS 02427</u>	21S	26E	08	4	2	2	200	160	40

Record Count: 65

**New Mexico Office of the State Engineer
Well Reports and Downloads**

Township: Range: Sections:

NAD27 X: Y: Zone: Search Radius:

County: Basin: Number: Suffix:

Owner Name: (First) (Last) ☐ Non-Domestic ☐ Domestic ☒ All

WATER COLUMN REPORT 09/07/2005

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are biggest to smallest)

Well Number	Tws	Rng	Sec	q	q	q	Zone	X	Y	Depth Well	Depth Water	Water (in feet) Column
C 02643	21S	25E	03	3	3					145	33	112
C 01041	21S	25E	03	3	3	3				85	65	20
C 02066	21S	25E	04	3	3	3				140	96	44
C 00885	21S	25E	05	2	4	3				379	348	31
C 01470	21S	25E	06	4	2					284	264	20
C 00550	21S	25E	11	2	1	1				97		
C 02268	21S	25E	11	3	4	1				30	25	5
C 00384 CLW201207	21S	25E	17	1	2	3				994	220	774
C 00384 CLW201180	21S	25E	17	1	2	3				994	220	774
C 00384	21S	25E	17	1	4	1				994	220	774
C 00927	21S	25E	18	4	2					300	24	276
C 02731	21S	25E	18	4	3	1				233	60	173
C 01451	21S	25E	22	3	3					290	260	30
C 01455	21S	25E	26	2	3					125	90	35
C 01456	21S	25E	33	2	2	4				60	17	43
C 02871	21S	25E	33	4	4	4				250		

Record Count: 16

**Oil Conservation
Division
1220 South Francis
Drive
Santa Fe, New Mexico
87505**

Addresses of people to send C-108 to:

SURFACE OWNER

New Mexico State Land Office
P O Box 1148
ATTN: Ms. Sharon Prichard
Santa Fe, NM 87504-1148

Fasken Oil & Ranch Ltd
303 W Wall Ave., Ste 1800
Midland TX 79701-5116

Devon
P O Box 60210
Midland TX 79711-0210

HEC Petroleum, Inc.
500 W Illinois
Midland TX 79701

Mewbourne Oil Co
500 W Texas, Ste 1020
Midland TX 79701

Kaiser-Francis Oil Co
P O Box 21468
Tulsa OK 74121-1468

ChevronTexaco
15 Smith Rd
Midland TX 79705

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Devon
P O Box 60210
Midland TX 79711-0210

Cateclaw-R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7482

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kaiser-Francis Oil Co
P O Box 21468
Tulsa OK 74121-1468

Cateclaw-R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7451

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ChevronTexaco
15 Smith Rd
Midland TX 79705

Cateclaw-R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7444

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Juanita Villalón
B. Received by (Printed Name)
C. Date of Delivery
10-12-05

☐ 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

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Felicia Simon
B. Received by (Printed Name)
C. Date of Delivery

☐ 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

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Reata Johnson
B. Received by (Printed Name)
C. Date of Delivery
10/17/05

☐ 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

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

New Mexico State Land Office
P O Box 1148
Santa Fe NM 87504-1148

Catchaw R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7437

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mewbourne Oil Co
500 W Texas, Ste 1020
Midland TX 79701

Catchaw R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7475

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Fasken Oil & Ranch Ltd
303 W Wall Ave., Ste 1800
Midland TX 79701-5116

Catchaw-R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7499

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

HEC Petroleum, Inc.
500 W Illinois
Midland TX 79701

Catchaw R

2. Article Number

(Transfer from service label)

7005 0390 0000 6081 7468

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? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

NEW MEXICO OIL CONSERVATION COMMISSION
DRAWER 10
ARTESIA, NEW MEXICO

FIELD REPORT FOR CEMENTING OF WELLS

Operator TXO Production Corp		Lease Catchew Draw St Com		Well # 2	
Location of Well	Unit 2000 FNL 850 FEL H	Section 18	Township 21	Range 26	County Eddy
Drilling Contractor Warton Drllg Co		Type of Equipment Rotary			

* Witness

APPROVED CASING PROGRAM

Size of Hole	Size of Casing	Weight Per Foot	New or Used	Depth	Sacks Cement
17 1/2	13 3/8"	48#		500'	200 Sx Circ
12 1/4	8 5/8"	24#		2200'	800 Sx Circ
7 7/8	4 1/2	11.6#		10,800'	1100 Sx

Casing Data:

Surface _____ joints of _____ inch _____ # Grade _____
(Approved) (Rejected) _____

Inspected by _____ date _____

Cementing Program

Size of hole 12" Size of Casing 8 5/8" Sacks cement required 1800 Sxs.

Type of Shoe used guide Float collar used inst. Btm 3 jts welded js

TD of hole 2250 Set 2253 Feet of 8 5/8 Inch 24 # Grade K-55

(New) used csg. @ 2250 with 200 sacks neat cement around shoe C.I.C. 20%
+ 200 sax Thixset 10# Gilsonite additives 1/4# 1st flocc + 250 H/L 10# Gilsonite 1/4# flocc *

Plug down @ 7:30 (AM) (PM) Date 2/7/82

Cement circulated yes No. of Sacks 300 Sxs.

Cemented by Halliburton Witnessed by Ray Brink

Temp. Survey ran @ _____ (AM) (PM) Date _____ top cement @ _____

Casing test @ _____ (AM) (PM) Date _____

Method Used _____ Witnessed by _____

Checked for shut off @ _____ (AM) (PM) Date _____

Method used _____ Witnessed by _____

Remarks: * 200 Thixset 10# Gilsonite 1/4# flocc, 250 Sxs. H/L 10# Gilsonite 1/4# flocc

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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

RECEIVED

MAR 26 1982

O. C. D.

ARTESIA OFFICE

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Catclaw Draw State Com
9. Well No. 2
10. Field and Pool, or Wildcat Catclaw Draw (Morrow)
12. County Eddy

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator TXO Production Corp. /
3. Address of Operator 900 Wilco Bldg. - Midland, TX 79701
4. Location of Well UNIT LETTER <u>H</u> <u>2000</u> FEET FROM THE <u>north</u> LINE AND <u>890</u> FEET FROM THE <u>east</u> LINE, SECTION <u>18</u> TOWNSHIP <u>T-21-S</u> RANGE <u>R-26-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3272.8' GR

15.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

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

Spud a 17 1/2" hole at 11:00 AM on 2-01-82. TD'd 17 1/2" hole on 2-02-82 and ran 13 3/8", 48#, H-40 ST&C casing. Landed casing at 520' and cemented with 600 sacks Class "C" cement with 2% CaCl. Circulated 85 sacks to pits. Plugged down at 8:00 AM 2-03-82. WOC 16 hrs. Casing parted at 254' from surface and cement fell back 120'. Cemented with 1" with 120 sacks Class "C" cement and filled annulus to surface. Could not get through 13 3/8" casing with 12 1/4" bit. Drilled out of surface casing with 11" bit. TD'd 11" hole at 2550'. Ran 8 5/8", 24#, K-55, ST&C casing and landed at 2250'. Cemented with 400 sacks Thixset plus additives, 500 sacks Light cement with additives and 200 sacks Class "C" with 2% CaCl. Circulated 300 sacks to pit. Plugged down at 8:45 PM on 2-07-82. Float held OK. WOC 12 hours. Tested casing to 2000 psi. OK. Drilled out of intermediate casing with a 7 7/8" bit. TD'd 7 7/8" hole at 10,860'. Ran 4 1/2", 11.6#, K-55, N-80, LT&C casing and landed at 10,860'. Cemented with 735 sacks Class "H" plus additives. Plugged down at 10:45 AM on 3-05-82.

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

SIGNED Carlton L. Beeth TITLE Drilling Engineer DATE 3-24-82

APPROVED BY M. L. Walker TITLE OIL AND GAS INSPECTOR DATE APR 1 1982

CONDITIONS OF APPROVAL, IF ANY:

Minimum WOC time 18 hrs.

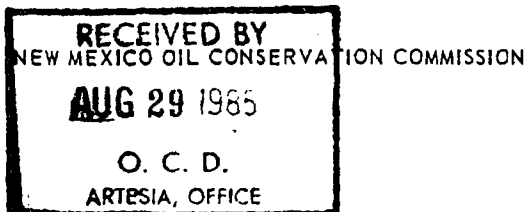
TXO. CATCLAW ST. #2.
H. 18-21-26. * 13 3/8" csg. 17 1/2" hole
9:00 am

1) Bill Raby from Western Co. called
& said he was to call the U.S.G.S
on this well by toolpusher. Tool-
pusher is the only company man
on loc. They set 520' of surface
cmt d. (w/ 600 sxs.) circ 85 sxs.
(2% cc 1/4" sk @ 10 ft/b.)

Bumped plug @ 7:00 am, parted
csg. Didn't know exactly, thought
@ bottom
Cement fell. SI csg. to
keep cmt. from falling any
further. Toolpusher suggested
to Western Co. man about run-
ning 1" down bk. side to find
TOC. Western Co. taking out
200 sxs. cl. c w/ 2a cl. Will keep
us posted.

Inf. of poi test after do if they
can get it circ. w/ 1" w/c, get back in &
do.

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



Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-85

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. NM 40625/ NM 84B

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

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL OTHER-	7. Unit Agreement Name
2. Name of Operator TXO Production Corp.	8. Farm or Lease Name Catclaw Draw St. Com.
3. Address of Operator 900 Wilco Bldg. Midland, TX 79701	9. Well No. 2
4. Location of Well UNIT LETTER <u>H</u> <u>2000</u> FEET FROM THE <u>North</u> LINE AND <u>890</u> FEET FROM THE <u>East</u> LINE, SECTION <u>18</u> TOWNSHIP <u>21-S</u> RANGE <u>26-E</u> NMPM.	10. Field and Pool, or Wildcat Catclaw Draw (Morrow)
11. Elevation (Show whether DF, RT, GR, etc.) 3272.8 GR	12. County Eddy

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

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

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

8-20-85 Rlsd pkr. TOO H w/2 3/8" tbg. TIH w/CIBP @10,415. 35'amt on top. Set 25sx "H" plug @9373. Set 25sx "H" plug @8121.
8-21-85 Cut 4 1/2" csg @7570.
8-22-85 Spt 35sx "C" plug @7606. Tagged plug @7520. Set 35sx "C" plug @5816. Set 35sx "C" plug @2304.
8-23-85 Tagged amt @2240. Set 25sx "C" plug @556. Set 10sx "C" plug @surface & installed dry hole mkr. Well P & A'd.

Post FD-2
9-13-85
AA

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

SIGNED Cilicia Henderson TITLE Engr. Asst. DATE 8-28-85

APPROVED BY Danell Moore TITLE Geologist DATE 3/11/86

CONDITIONS OF APPROVAL, IF ANY: