ENER	STATE OF NEW MEXICI GY AND MINERALS DEPAR MENT	UIL GUNSEHVA HUIV BIVIDIUN POST OFFICE BOX 2000 STATE LAND OFFICE BUILDING GANTA FE NEW MEXICO 87501	ρΜΧ	Revised 7-1-81 9/23/9
APHLICA	ATION FOR AUTHORIZATION TO INJECT			// -/
Ι.	Purpose: Decondary Recovery Application qualifies for adm	EX Pressure Mainten inistrative approval?	Ance Dimo	sal Gtorage
11.	Operator: SOUTHWEST	ROYALTIES, INC.		
	Address: P.O. BOX 1	1390 MIDLAND, TX	79702 SEP	- 8 1997
	Contact party: James Bloum			<u>6-9927 or 1 800 43</u> 3-79
111.	Well data: Complete the data rec proposed for injectio	quired on the reverse : on. Additional sheets	side of this formation of the second se	WATCH DIVISION orm_for_each_well1 ed if necessary.
ΙΫ.	Is this an expansion of an exist: If yes, give the Division order n		Dno project	SWD 547
۷.	Attach a map that identifies all injection well with a one-half mi well. This circle identifies the	ile radius circle draw	n around each j	
* VI.	Attach a tabulation of data on al penetrate the proposed injection well's type, construction, date of a schematic of any plugged well i	zone. Such data shal drilled, location, dep	l include a dea th, record of a	scription of each
VII.	Attach data on the proposed opera	ation, including:		
	 Proposed average and maximum system is operation of the system is operation. Proposed average and maximum system is operation. Sources and an appropriate the receiving formation. If injection is for disposation of the disposal zone formation. 	en or closed; imum injection pressur te analysis of injection if other than reinjec osal purposes into a zo of the proposed well, a ition water (may be mea	; on fluid and co cted produced a one not produced attach a chemic	ompatibility with water; and tive of oil or gas cal analysis of
*VII	detail, geological name, thickness bottom of all underground sources total dissolved solids concentrat injection zone as well as any suc injection interval.	ss, and depth. Give the solution of drinking water (actions of 10,000 mg/l or	ne geologic nam quifers contain r less) overly	ne, and depth to ning waters with ing the proposed
1X.	Describe the proposed stimulation	n program, if any.		
• X.	Attach appropriate logging and to with the Division they need not t		(If well logs	have been filed
* XI.	Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.			
XII.	Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.			
XIII.	Applicants must complete the "Proof of Notice" section on the reverse side of this form.			
XIV.	Certification			
.*	I hereby certify that the informa to the best of my knowledge and b	ation submitted with the	his application	is true and correct
	Name: James Blount	Titl	e Area Super	visor
	Signature: Jame Blour	Da	te: 8-27-97	

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 perforsted intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
 - (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

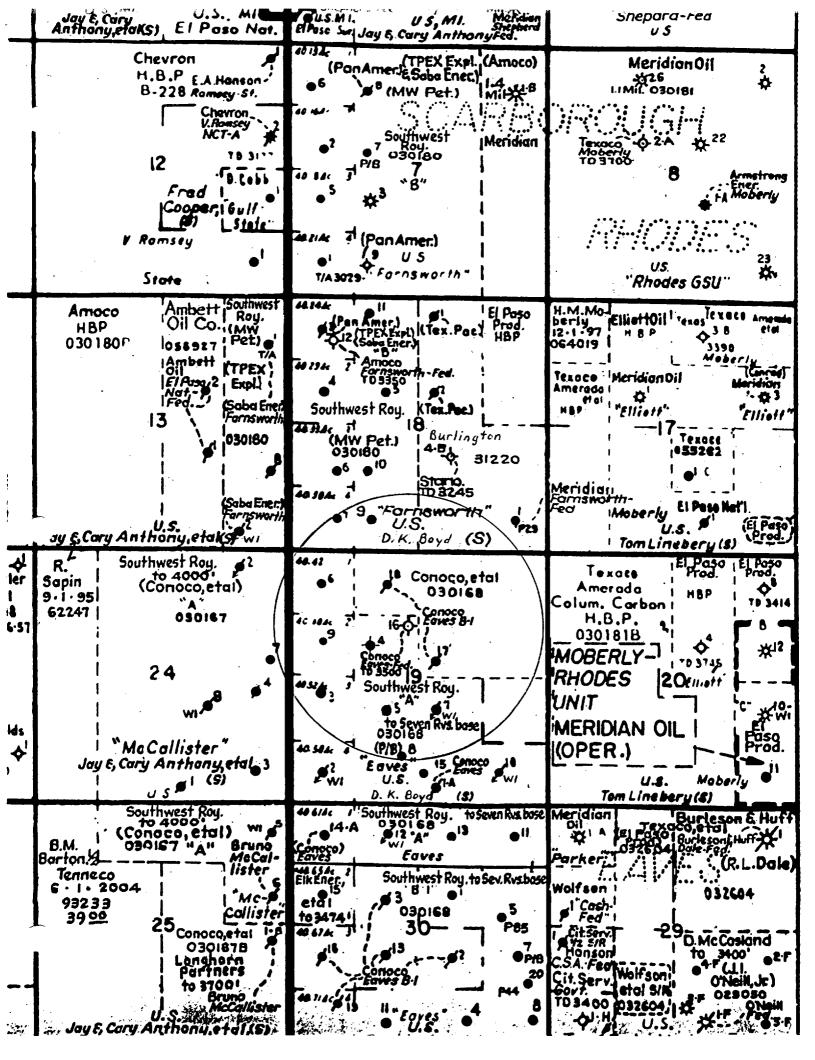
- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

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

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

000 0 N A		LTIES, INC.	EAVES A	30 02.	5 30423		
OPERA 16		50' FNL & 2460' FW	LEASE		26S	, -	37E
		OTAGE LOCATION	SECTION		TOWNSHIP	RA	INCE
	Schematic	<u>:</u>		Tabula	r Data		
			Surface Casing				
			Size 8-5/8"	18	Cemented w	ith	700
			TOCSurf.			by	Circ.
			Hole size	12-1/4"			
			Intermediate Casir	ng			
			Size		Cemented w	ith	
	4	\$ 8 7/8 "@ 1160'	TOC	feet	determined	Ьу	
			Hole size				
			Long string				
			Size 5-1/2"		Cemented w	ith	1000
			toc2750				
			Hole size	7-7/8"			
			Total depth	3500			
			Injection interval	1			
			2902 fe	et to	3450	fe	et
		5 ½ "@ 3500'					
		5 1/2 "@ 3500'					
Tubin	ng size <u>3</u>		d with <u>Plast</u>	<u>ic Coate</u>	4		_ set i
Tubin		<u>-1/2"</u> lined		<u>ic Coatec</u> (material) ker at			_
	Baker Mo (brand a	-1/2"line(del AD-1 (Tension) and model)	pacl				_
(or d	Baker Mo (brand a lescribe any	<u>-1/2"</u> lined	pacl				-
(or d Other	Baker Mo (brand a lescribe any Data	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) v other casing-tubing	pac)	ker at	2850		_ set i fee
(or d <u>Other</u> 1. N	Baker Mo (brand a lescribe any Data lame of the	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) v other casing-tubing injection formation	pack j seal). Seven	ker at Rivers/Y	2850 Yates	Rivers	fee
(or d <u>Other</u> 1. N 2. N	Baker Mo (brand a lescribe any Data lame of the lame of Fiel	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) v other casing-tubing	pack pack Seven Seven	ker at Rivers/Y orough Ya	2850 Yates ates Seven J	Rivers	fee
(or d <u>Other</u> 1. N 2. N 3. I	Baker Mo (brand a lescribe any Data lame of the lame of Fiel	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) v other casing-tubing injection formation Id or Pool (if applic	pack pseal). Seven ccble) <u>Scarb</u> injection? <u>/</u> 7 Yes	Rivers/M orough Ya s AXX	2850 Yates ates Seven J	Rivers	fee
(or d <u>Other</u> 1. N 2. N 3. I I 4. H	Baker Mo (brand a lescribe any Data lame of the lame of Fiel is this a nu if no, for w las the well and give plu	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) o other casing-tubing injection formation Id or Pool (if appliant what purpose was the l ever been perforst ugging detail (sacks	pack pack seal). Seven Seven Scarbe injection? /_7 Yes well originally dr. ed in any other zone	Rivers/Morough Ya s <u>AXX</u> illed? e(a)? Li:	2850 Yates ates Seven J No Oil st all such	perfora	fee fee ted int
(or d <u>Other</u> 1. N 2. N 3. I I 4. H	Baker Mo (brand a lescribe any Data lame of the lame of Fiel is this a no if no, for w las the well and give plu No o	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) other casing-tubing injection formation ld or Pool (if applia ew well drilled for what purpose was the l ever been perforat agging detail (sacks ther Perforations	pack seal). <u>Seven</u> <u>sebla</u>) <u>Scarb</u> injection? <u>/</u> 7 Yes well originally dr. well originally dr. of cement or bridge	Rivers/M orough Ya s AXX illed? e(a)? Lis e plug(s)	2850 Yates ates Seven J No Oil st all such	perfora	fee fee
(or d <u>Other</u> 1. N 2. N 3. I 4. H 5. (Baker Mo (brand a lescribe any Data lame of the lame of Fiel is this a no if no, for w las the well and give plu No o Prod	<u>-1/2"</u> lined <u>del AD-1 (Tension)</u> and model) o other casing-tubing injection formation Id or Pool (if appliant what purpose was the l ever been perforst ugging detail (sacks	pack seal). <u>Seven</u> <u>sebla</u>) <u>Scarb</u> injection? <u>/</u> 7 Yes well originally dr. ed in any other zon of cement or bridge vals between 2902-2	Rivers/Morough Yas AXX illed? e(a)? Line e plug(s) 3450'.	2850 Yates ates Seven J No Oil st all such used)	perfora	fee
(or d <u>Other</u> 1. N 2. N 3. I 4. H 5. (Baker Mo (brand a lescribe any Data lame of the lame of Fiel is this a no if no, for w las the well and give plu No o Prod	-1/2" line del AD-1 (Tension) ind model) v other casing-tubing injection formation ld or Pool (if applity ew well drilled for what purpose was the l ever been perforat agging detail (sacks ther Perforations uced through interv	pack pseal). Seven Seven Seven injection? /_7 Yes well originally dr of cement or bridge vals between 2902-2 ny overlying and/or	Rivers/Morough Yas AXX iilled? e(a)? Line e plug(s) 3450'. underlyin	2850 Yates ates Seven J No Oil st all such used) 	perfora	fee

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Farnsworth A-7

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Location: 660' FSL & 990' FWL Type: Oil Sec 18, T26S, R37E Date Drilled: 5/41 Total Depth: 3223'

Casing Record:

Size	Depth	Sacks Cement
13"	50'	50
8 5/8"	1228'	400
5 1/2"	2869'	215

Completion:

6/41	OH 2896-2965'.
1/54	Deepened well to 3223'. Run 400' 4" liner. Perf @ 3188-96'.
6/62	INPE.
6/93	Install submersible pump.

Farnsworth A-9

Location: 660' FSL & 1663' FWL	Sec 18, T26S, R37E
Type: Oil	Date Drilled: 8/63
	Total Depth: 3263'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	318'	125
5 1/2"	3263'	200

Completion:

8/63	Perf 3215-22'.
4/70	Added perfs from 2960-3045'.
8/70	Added perfs from 3182-88'.
8/94	Squeezed perfs from 2960-3045'. Added perfs from 3143-46'.

Eaves	A-6
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Lavesil	
Location: 660' FNL & 660' FWL	Sec 19, T26S, R37E
Type: Oil	Date Drilled: 3/50
	Total Depth: 3305'

Casing Record:

Size	Depth	Sacks Cement
7 5/8"	1179'	500
5 1/2"	3299'	780

Completion:

3/50	Retainers @ 3283', 3265', 3255', 3237', & 3201' all cemented w/50 sx.
3/50	Perf @ 3190-3200'.
9/70	Perf @ 3132-79
2/81	Perf @ 3121-96. Ran submersible pump.

Eaves A-9

Location: 1980' FNL & 660' FWL	Sec 19, T26S, R37E
Type: Oil	Date Drilled: 9/57
	Total Depth: 3250'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	374'	275
5 1/2"	3250'	1209

Completion:

9/57	Perf 3178-84'.
2/80	Added perfs from 3120-86'.
4/93	Added perfs from 3033-85'
4/93	Squeezed perfs from 3033-85'.

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Eaves A-3

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Location:	2310'	FSL	& 660'	FWL
Type: Oil				

Sec 19, T26S, R37E Date Drilled: 2/37 Total Depth: 3192'

Casing Record:

Size	Depth	Sacks Cement
13"	263'	175
9 5/8"	1563'	450
7"	3087'	400

Completion:

2/37	Comp OH 3087-3192'.
9/94	Run 5 ¹ / ₂ " String w/pkr set @ 3084' & reacidize.
9/94	Put on submersible pump.

Eaves A-7

Location: 1980' FSL & 2310' FEL	Sec 19, T26S, R37E
Type: Injector	Date Drilled: 9/50
	Total Depth: 3450'

Casing Record:

Size	Depth	Sacks Cement
9 5/8"	1159'	465
7"	3215'	740

Completion:

9/50	Perf 3082-96'.
10/73	TA'd well.
7/80	Converted to injection.
6/93	Drill out to 3450'. Continue injection.

Eaves A-5

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Location : 1980' FSL & 1980' FWL Type : Disposal Original Completion: 2/27/49 Section 19 T26S R37E Date Drilled: 2/19/49 Total Depth 3220'

Casing Record:

Size	Depth	Sacks Cement
7 5/8"	1228'	500
5 1/2"	3219'	600

Pay: 3198-3204'; 3207-3213'

Completion:

12/65	Placed well on pumping unit
8/71	Perf @ 3112', 17', 25', 37', 42', 52', 65', 77'
1/74	Put Submersible pump
2/5/87	Perf @ 3042'-3104'
2/9/87	Perf @ 2975'-3035'
2/11/87	Perf @ 2937'-68'
6/87	Convert to SWD
11/93	Proposed to sqz perfs & put back on production

Eaves A-8

Location : 990' FSL & 2310' FWL Type : Oil Original Completion: 2/15/53 Section 19 T26S R37E Date Drilled: 2/53 Total Depth 3228'

Casing Record:

Size	Depth	Sacks Cement
7 5/8"	1190'	440
5 1/2"	3223'	598

Completion:

5/53	Perfs @ 3204'-217'
6/60	Perfd @ 2768'-96', 2810'-32', 2848'-64', 2878'-90'
	Frac w/ 12000 gal crude & 12000# sand
10/85	Squeeze perfs @ 2768'-2890', 3204'-217'
	Perf @ 3092'-180'
11/85	Perf @ 3092'-180'
2/86	Squeeze perfs @ 3020'-3061'
	Perf @ 2992'-3010'
11/93	Proposed to install submersible pump.

Eaves B-1 #17

Location: 2310' FNL & 2310' FEL Type: Oil Sec 19, T26S, R37E Date Drilled: 1/41 Total Depth: 3126'

Casing Record:

Size	Depth	Sacks Cement
9 5/8"	1234'	425
7"	2806'	500

Completion:

2/41 Comp OH 2806-3126'.

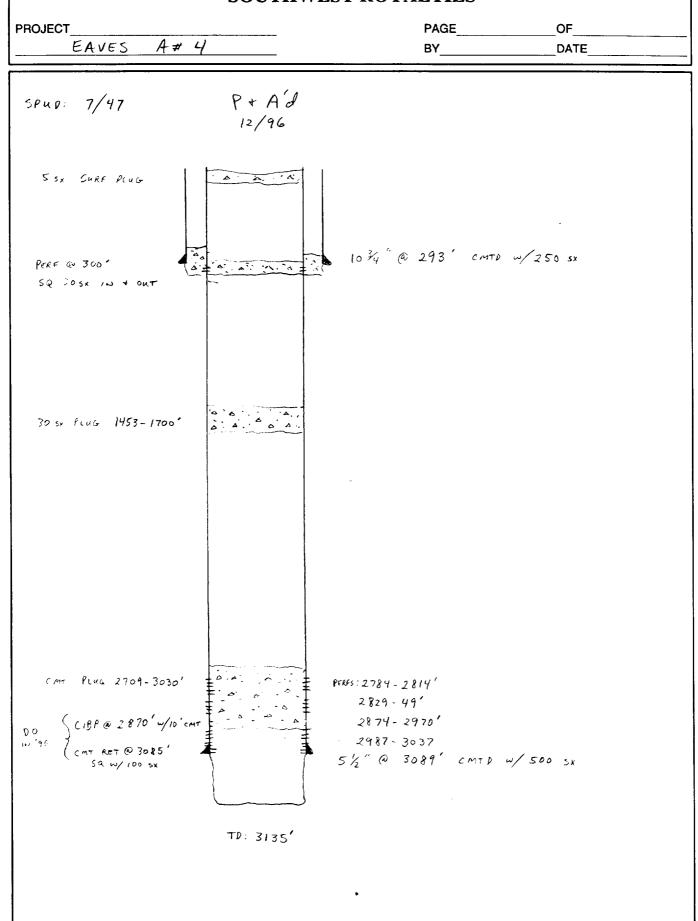
EAVES B-1 # 18

P+ Ad: 10/87 SPUD: 5/41 660'FNL, 1980'FWL Top of Salt: 1300' Sec. 19, T-265, R-37E Base of Salt: 2650' FLEV.: 2961 20.sk surface plug Note . circulated in place The in hele. to ± 50' <u>TOC 122'</u> 5,8 15. ; 95%, 32.3 #@ 1219' w/425. Top of Salt 1300' (circulated) 9.5 ppg mud 35 sk cmt plug set across top of Sait. (1149'-1360') ţ ÷ ʻİ ļ 1.1 ł B) <u>TOL @ 2407'</u> Base of Sall - 7",24# @ 2740' w/425s 2650 50 sk emt-plug CIBPE 3035 Producing Seven Rivers set across top of BP and across 3085 - 3122 Base of Salt. 3172'-3180' (TOC@_2367_ 4 1/2", 9.5 #@3222' w/125 5x completed! 1941 <u>ד0:32</u>22 PB: 3200

A Made By KWT

P.04





PG-10

UNICHEM INTERNATIONAL P.O. 80X 61427 4312 County Road 1298 S. Midland, Texas 79711

Hal J. Rasmussen

.

Report Date: September 23, 1993 Lab In Date: September 22, 1993 Sample Date: September 17, 1993

	Specific Gravity:		1.001	
	Total Dissolved Solids: PH:		1018	
			7.81	
	Ionic Strength:		.020	
CATIONS:	:==#\$: \:::::::::::::::::: :::::::::::::::::	mg/liter	
	Calcium:	(Ca++)	44	
	Magnesium:	(Mg++)	44	
	Sodium:	(Na+)	194	
	Iron (Total)	(Fe++)	3.10	
	Barium	(Ba++)	0.00	
	Manganese:	(Mn++)	.18	
	Resistivity:			
NIONS:				
	Bicarbonate:	(HCO3-)	368	
	Carbonate:	(CO3)	0	
	Hydroxide:	(OH-)	0	
	Sulfate:	(\$04)	295	
	Chloride:	(C(-)	73	
-=====================================	_	222288822222222222222222		
14353:	Carbon Dioxide:	(CO2)	*****	
	Oxygen:	(02)	*****	
	Hydrogen Sulfide:	(H2S)	*****	

Temp	erature	CaCO3 SI	CaSO4 SI
8 6F	30.0C	.55	-21.21
104F	40.0C	.84	-21.37
122F	50.0C	.98	-21.37
140F	60.0C	1.14	-21.21
168F	70.0C	1.31	-20.25
176F	80.0C	1.49	-19.07

If you have any questions or require further information, please contact us.

Sincerely,

Jeanne m. momuney

Laboratory Technician

cc:

bc: Charlie Vaden

VII Proposed Operation

This well will be used to inject produced water from other wells on the Eaves lease via a closed pressure maintainence system.

Proposed average injection rate & pressure: 6000 BWPD @ Vacuum. Proposed maximum injection rate & pressure: 10000 BWPD @ 400 psi.

VIII Geological DATA

This produced water will be injected into the Yates/Seven Rivers formation which is located from 3220' to 3340'. The Yates/Seven Rivers formation consists mostly of sand and lime.

The source of underground drinking water in the area is the Ogallala formation (base at $\pm 196'$).

IX Proposed Stimulation

We will drill out CIBP @ 2860' & clean out the wellbore to PBTD @ 3475'. Set Baker Model AD-1 packer at 2850' and acidize with 3000 gallons acid if necessary.

XII I have examined available geologic & engineering data and find no evidence of open faults or any other hydrologic connection between the injection zone and any underground source of drinking water. Mailing List

Surface Owner

-

Mr. D. K. Boyd PO Box 11351 Midland, Texas 79702

Offset Operators

Conoco 10 Desta Dr., Ste. 100W Midland, TX 79705-4500

Burlington Resources P.O. Box 51810 Midland, Tx. 79710-1810

AFFIDAVIT OF PUBLICATION

State of New Mexico, County of Lea.

I, KATHI BEARDEN

Publisher

of the Hobbs Daily News-Sun, a daily newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period.

1

of_____

weeks.

Beginning with the issue dated

August 28 1997 and ending with the issue dated

August 28 1997

Publisher Sworn and subscribed to before

me this <u>28th</u> day of

August

_____ 1997

Notary Public.

My Commision expires October 18, 2000 (Seal)

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 publication has been made. 01101469000 02509106

Southwest Royalties, Inc. P.O. Box 11390 a/c# 476043 Midland, TX 79702

AUGUST 28, 1997 **APPLICATION TO AMEND AUTHORIZATION TO** INJECT Southwest Royalties, Inc., PO Box 11390, Midland, Tx. 79702, (915) 686-9927, is seeking approval from the New Mexico Oil Conservation Division to inject in the Eaves A #16, salt water for pressure maintenance located at 1550 FNL & 2460 FWL Sec. 19, T26S, R37E, Lea County, New Mexico. The proposed injection zone is the Yates/Seven Rivers formation of the Scarborough-Yates Seven River Pool through perforations from 2902-3450'. Southwest Royalties, Inc., intends to inject a maximum of 10,000 BWPD @ 400 PSI. Interested parties must file objections or requests for hearing with the Oil Conservation Division: PO Box 2088, Santa Fe, New Mexico, 87501 within 15 days.

LEGAL NOTICE

#15389

 Print your name and address on the reverse of this form so that we carried in this card to you.
 Attach this form to the front of the mailplece, or on the back if space does not **reverse** Uxilia iou). 1. Addressee's Address Pretain the role of the interpretation of the mailpiece below the article number.
 Write "Return Receipt will show to whom the article was delivered and the date delivered. 2. C Restricted Delivery ţ Consult postmaster for fee. 5 3. Article Addressed to: 4a. Article Number completed P8041 ってと n.D.K. Boyd 4b. Service Type Registered Certified **RETURN ADDRESS** 79702 Insured Express Mail Return Receipt for Merchandise COD 7. Date of Delivery SEP 2 1997 8. Addressee's Address (Only if requested 5. Received By: (Print Name) and fee is paid) 6. Signature: (Addrestee) or Agent, ls your X Domestic Return Receipt PS Forth 3811, December 1994 SENDER: side? l also wish to receive the Complete items 1 and/or 2 for additional services.
 Complete items 3, 4a, and 4b. following services (for an Print your name and address on the reverse of this form so that we can return this reverse extra fee): card to you. = Attach this form to the front of the mailpiece, or on the back if space does not 1. Addressee's Addre permit Write "Return Receipt Requested" on the mailpiece below the article number.
 The Return Receipt will show to whom the article was delivered and the date 2. C Restricted Delivery ţ delivered. Consult postmaster for fee 5 4a. Article Number 3. Article Addressed to: තීථ 4b. Service Type 518 Registered Certi RETURN ADDRESS Express Mail Insu Return Receipt for Merchandise COL 79710_1810 7. Date of Delivery 5. Received By: (Print Name) 8. Addressee's Address (Only if request and fee is paid) 6. Signature: (Addressee or Agent your Х တ PS Form 381/1, December 1994 Domestic Return Rec side? SENDER: I also wish to receive the Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. following services (for an Print your name and address on the reverse of this form so that we can return this extra fee): card to you. Attach this form to the front of the mailpiece, or on the back if space does not 1. 🖾 Addressee's Addr permit. Write "Return Receipt Requested" on the mailpiece below the article number. 2. C Restricted Deliver The Return Receipt will show to whom the article was delivered and the date Consult postmaster for fer delivered. 5 3. Article Addressed to: Article Number **RETURN ADDRESS completed** 4b. Service Type 10 Desta De Ste.100W Registered Cer Express Mail 🔲 Insi Return Receipt for Merchandise 79705-4500 7. Date of Delivery Ъ 5. Received By: (Print Name) 8. Addressee's Address (Only if reques and fee is paid) VOUL essee or Ager ature 9 PS Form 3811, December 1994 **Domestic Return Re**

CHECKLIST for ADMINISTRATIVE INJECTION APPLICATIONS
Operator: <u>SN Royauries, INC.</u> Well: <u>FAVES</u> A 16 Contact: <u>JAMAS BLOWNE</u> Title: <u>AREA SUPERVISOR</u> Phone: <u>915 686.9927</u>
Contact: JAMAS BLOWNT Title: ARHA SUPERVISOR Phone: 915 686.9927
DATE IN <u>9.8.97</u> RELEASE DATE <u>9.23.97</u> DATE OUT <u>10.15.97</u>
Proposed Injection Application is for: X WATERFLOOD Expansion Initial
Driginal Order: R- <u>6217</u> Secondary Recovery <u>×</u> Pressure Maintenance
SENSITIVE AREASSALT WATER DISPOSAL Commercial WellWIPP Capitan Reef
Data is complete for proposed well(s)? <u>46</u> 5 Additional Data Req'd <u>NO</u>
AREA of REVIEW WELLS
<u>7</u> Total # of AOR $\frac{Z}{2}$ # of Plugged Wells
465 Tabulation Complete 465 Schematics of P& A's
465 Cement Tops Adequate AOR Repair Required
NJECTION FORMATION Injection Formation(s) <u>JATES SEVEN RIVERS</u> Compatible Analysis <u>465</u> Source of Water or Injectate <u>AREA PRODUCTION</u>
Source of Water or Injectate AREA PRODUCTION
PROOF of NOTICE
Copy of Legal Notice
Correct Operators
More Dependence Depend
NOTES:
APPLICATION QUALIFIES FOR ADMINISTRATIVE APPROVAL? 465
OMMUNICATION WITH CONTACT PERSON: 1st Contact:TelephonedLetterDate Nature o f Discussion

2nd Contact:	Telephoned	Letter	Date	Nature o f Discussion
3rd Contact:	Telephoned	Letter	Date	Nature of Discussion