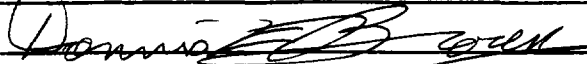


RELEASE 6.30.92

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage  
Application qualifies for administrative approval? ☒ yes ☐ no
- II. Operator: Manzano Oil Corporation  
Address: P.O. Box 2107, Roswell, NM 88202-2107  
Contact party: Donnie E. Brown Phone: (505) 623-1996
- 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 N/A.
- 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 geological data on the injection zone including appropriate lithologic detail, geological 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 source 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 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 information submitted with this application is true and correct to the best of my knowledge and belief.
- Name: Donnie E. Brown Title Vice President, Engineering  
Signature:  Date: May 28, 1992
- \* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal. N/A

## 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 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.

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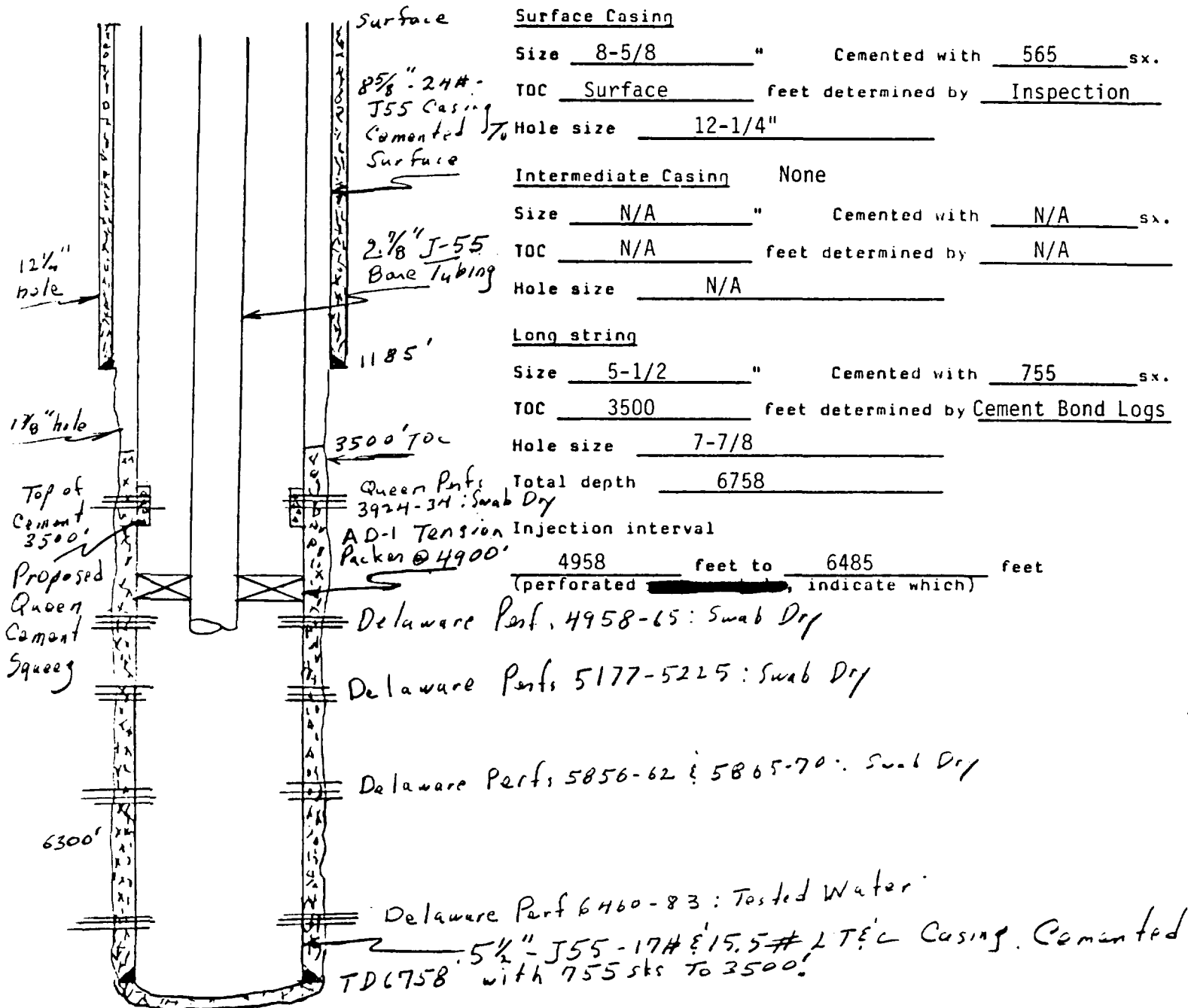
NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

## INJECTION WELL DATA SHEET

Manzano Oil Corporation OPERATOR		Anadarko Federal LEASE	
1 WELL NO.	1980' FSL & 660' FEL FOOTAGE LOCATION	15 SECTION	18 South 32 East TOWNSHIP RANGE

## Schematic

## Tabular Data



Tubing size 2-7/8 lined with Bare Pipe set in a (material)

Baker Model "AD-1" Tension Packer packer at 6300 feet

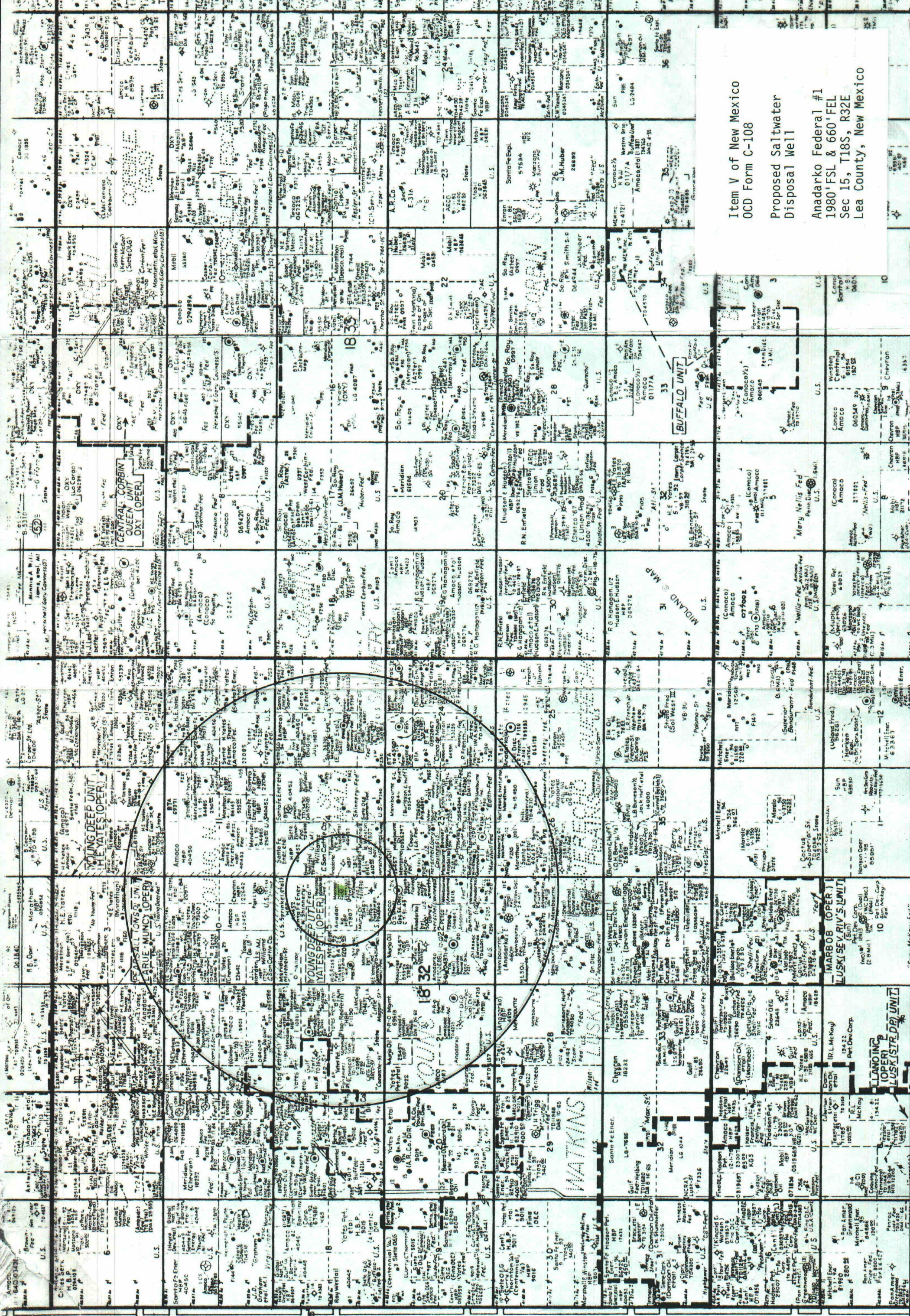
(brand and model)

(or describe any other casing-tubing seal).

## Other Data

- Name of the injection formation Delaware
- Name of field or Pool (if applicable) Corbin Delaware, West
- Is this a new well drilled for injection? ☐ Yes ☒ No  
If no, for what purpose was the well originally drilled? Well was drilled to top of Bone Spring. All Delaware Zone of interest was tested for oil. No commercial oil found.
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) Delaware: 6460-83 - 13 holes; 5856-62 & 5865-70 - 22 holes; 5177-5225 - 19 holes; 4958-65 - 14 holes. Queen Sand 3924-34 - 20 holes. Queen to be squeezed.
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. Overlying: Queen  
Underlying: Bonesprings & Wolfcamp





Item V of New Mexico  
OCD Form C-108

Proposed Saltwater  
Disposal Well

Anadarko Federal #1  
1980' FSL & 660' FEL  
Sec 15, T18S, R32E  
Lea County, New Mexico

EDDY, East

18 S



<u>Operator</u>	<u>Lease/Well</u>	<u>Location</u>	<u>Type</u>	<u>Construction</u>	<u>Date Drilled</u>	<u>Depth</u>	<u>Completion Comments</u>
1. Siete Oil & Gas	Yuma Federal #1	Sec 14, T18S, R32E 2310'FSL & 1980'FWL	D&A	8-5/8" @ 430' w/230 sks	4/29/89	6900'	40 sks Cement Plug at 5926' 50 sks Cement Plug at 4652' 50 sks Cement Plug at 1182' 70 sks Cement Plug at 480' 20 sks Cement Plug at 420' 20 sks Cement Surface Plug
2. Manzano Oil Corp.	Anadarko Federal #1	Section 15, T18S, R32E 1980'FSL & 660'FEL	T&A	8-5/8" @ 1185' w/565 sks 5-1/2" @ 6758' w/755 sks	1/21/91	6758'	Perf 6460-85. Frac. Pump tsg SW. Perf 5856-70. Acidize. Swab dry. Perf 5177-5226. Acidize. Swab dry. Perf 4958-65. Acidize. Swab dry. Perf 3924-34. Acidize. Swab dry. TA on 5-15-92.
3. Manzano Oil Corp.	Jewett Federal #1	Section 15, T18S, R32E 660'FSL & 660'FEL	Oil	13-3/8" @ 610' w/475 sks 8-5/8" @ 4425' w/250 sks 5-1/2" @ 8620' w/850 sks	1/06/92	8620'	Perf 8315-8430. Acidize. Swab dry. Bulled plugged packer at 6587. Perf 6290-6310. Producing.

Item VII of New Mexico OCD Form C-108  
Data on Proposed Operations  
Anadarko Federal #1

1. The proposed average and maximum daily injection rate is 550 BWPD and 800 BWPD, respectively.
2. The injection system will be operated as a closed system.
3. The average injection pressure is expected to be 1300 psi. The maximum injection should not be over 2000 psi.  $4958' \times .2 \text{ psi} = 992 \text{ PSI MAX}$
4. Source for the disposal water will be the Manzano Jewett Federal #1, 660'FSL & 660'FEL, Section 15, Township 18 South, Range 32 East. Water analysis for the Jewett Delaware produced water is attached as Exhibit VII 4a.
5. Water analysis of the disposal zone formation water in the Anadarko Federal #1 is attached as Exhibit VII 4b.

Exhibit VII 4a.

THE WESTERN COMPANY OF NORTH AMERICA  
WATER ANALYSIS

ANALYSIS NO: 920311A

GENERAL INFORMATION

OPERATOR: MANZANO  
WELL: JEWETT NO.1  
FIELD:  
FORMATION: DELEWARE  
COUNTY:  
STATE: NM

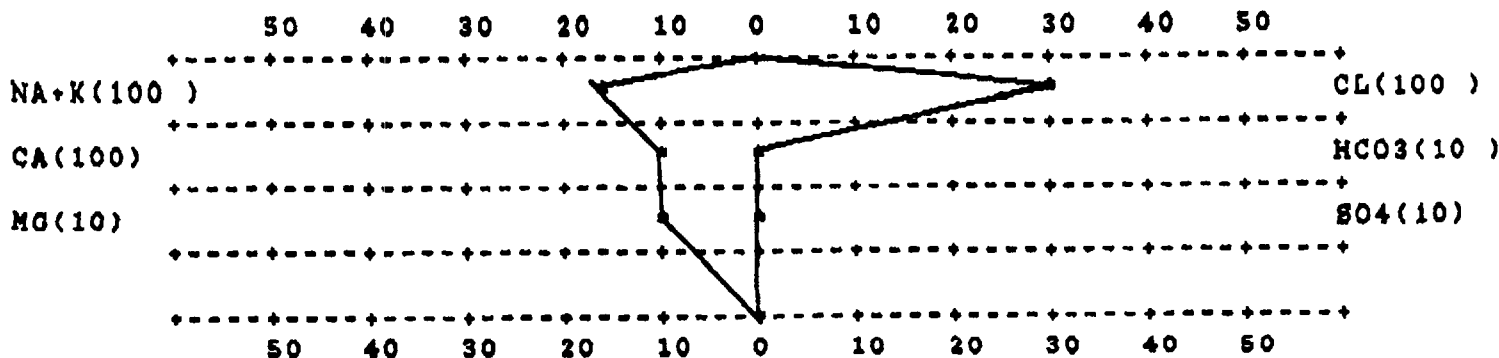
DEPTH:  
DATE SAMPLED: 3-10-92  
DATE RECEIVED: 3-10-92  
SUBMITTED BY: STEVE M.  
WORKED BY: SHEPHERD  
PHONE: 505-392-5556

SAMPLE DESCR: OIL & WATER

PHYSICAL AND CHEMICAL DETERMINATIONS

SPECIFIC GRAVITY: 1.135 AT 65 DEG. F PH = 8.88  
IRON: NOT DETERMINED SULFATE: 520 PPM  
FE2+: 25 PPM  
SODIUM+POTASS: 48223 PPM CHLORIDE: 108346 PPM  
CALCIUM: 17639 PPM SODIUM CHLORIDE (CALC): 170608 PPM  
MAGNESIUM: 1070 PPM BICARBONATE: 215 PPM  
PHOSPHATE: NOT DETERMINED TOT. HARDNESS AS CaCO3: 48502 PPM  
RESISTIVITY (CALCULATED): 0.051 OHM/METER @ 75 DEGREES F. TOT. DISSOLVED SOLIDS: 205805 PPM  
REMARKS:

STIFF TYPE PLOT (IN MEQ/L)



ANALYST

SHEPHERD

Exhibit VII 46

# HALLIBURTON SERVICES HOBBS, NEW MEXICO

To Manzano Oil Corporation.Sample Number 121P.O. Box 2107Roswell New Mexico. 88202

This report is the property of Halliburton Company and neither it nor any part thereof nor a copy thereof is to be published or disclosed without first securing the express written approval of laboratory management; it may however, be used in the course of regular business operations by any person or persons and employees thereof receiving such report from Halliburton Company.

Submitted by Robert Denney/ Halliburton Services Date Received 4-15-92Well No. Anadarko Federal #1 Depth 6300 Formation DelawareCounty Lea Field  Source well headResistivity..... 0.052 @ 70°FSpecific Gr..... 1.170pH..... 5.8Calcium\*..... 14750

Ca

Magnesium\*..... 8250

Mg

Chlorides\*..... 144690

Cl

Sulfates\*..... 716SO<sub>4</sub>Bicarbonates\*.... 134HCO<sub>3</sub>Soluble Iron\*.... 10

Fe

Remarks: Solid material submitted appeared to be large amount of Calcium Sulfate, Small amount of Iron Sulfate with a small amount of Iron Sulfide.

\*Milligrams per liter

Respectfully submitted,

Analyst: ALLEN B. ANNE

HALLIBURTON COMPANY



Item VIII of New Mexico OCD Form C-108  
Geologic Data of the Injection Zone & Underground Drinking Water  
Anadarko Federal #1

The proposed interval for salt water disposal is the Delaware Mountain Group between the depths of 4958 and 6485' in the Manzano Anadarko Federal #1. The Delaware Mountain Group is a sequence well consolidated sandstone, siltstone and shale strata of Permian age. The 6460-83 zone has been perforated, acidized, and fractured with 18k gallons of gelled polymer + 47k pounds of sand. After the fracture treatment, the well pumped 110 barrels of salt water per day plus a trace of oil. It is not productive of commercial oil. The Delaware zone 5856-62 & 5865-70; 5177-5225; and 4958-65 were perforated and acidized. After treatment, each of the zones swab tested dry with minimum fluid entry. No commercial Delaware oil pay was found.

Based on information from the New Mexico State Engineer's Office in Roswell and the OCD files in Hobbs, there appears to be only one fresh water well within T18S, R32E. This water well has a total depth of 270' and is located in the NWNWSESENE of Section 20 (2-1/2 miles away from proposed disposal well). The fresh water zone in this well is the Triassic Red Beds. The only other strata with potential fresh water is the Alluvium which is shallower than the Red Beds.

There are no known fresh water strata underlying the Delaware.

Items IX through XIII  
New Mexico OCD Form C-108  
Anadarko Federal #1

- Item IX. The proposed Delaware zone 6460-85 has already been perforated with 13 holes, acidized with 1000 gallons of 7-1/2% HCl, and fractured treated with 16,000 gallons of cross link polymer + 47,000 pounds of 20/40 sand. The other three Delaware zones 5856-70; 5177-5225; and 4958-65 have also been perforated and acidized. No additional stimulation should be required.
- Item X. All test data is attached as Exhibits X1 and X2. All logs for this well are already on file with the State of New Mexico Oil Conservation Division (OCD) and will not be resubmitted with this application.
- Item XI. The only strata within one mile of the proposed disposal well which contains fresh water is confined to 270' and shallower. No contamination of this fresh water should occur since the proposed disposal well has surface casing set at 1185'KB with cement circulated to surface. There are no fresh water wells within one mile of this proposed salt water disposal well.
- Item XII. Manzano Oil has examined all available geological and engineering data in the surrounding area of the proposed disposal well and found no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- Item XIII. Proof of notice is attached. See Exhibits XIII A and B.



*Exhibit X 1.*

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Manzano Oil Corporation

3. Address and Telephone No.

P.O. Box 2107, Roswell, NM 88202-2107

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 660' FEL  
Section 15, T18S-R32E

5. Lease Designation and Serial No.

NM-17807

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Anadarko Federal #1

9. API Well No.

10. Field and Pool, or Exploratory Area

Undesignated Delaware

11. County or Parish, State

Lea Co., New Mexico

**12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

**TYPE OF SUBMISSION**

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

**TYPE OF ACTION**

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other \_\_\_\_\_
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Resumption Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

2-20-92 Ran CBL/CET w/AMS. TOC 3490'. PBD 6696'. Good bonds over zones of interest.

2-25-92 TIH w/pkr to 1520' & set. Tstg tbg to 1500 psi - OK. Tstg bksd to 1000 psi - OK.  
Pull pkr to 1380' & set. Tstg tbg to 1500 psi - OK.

2-26-92 Tstg csg 2500 psi w/pkr set @ 1380' for 5" - OK

Perf: 6460' 6467' 6479'  
61' 68' 80'  
62' 70' 81'  
66' 78' 82'  
83'

Total 13 holes. Tally IH w/pkr & 2-7/8" J55 tbg to 6503'. Left pkr swing.

2-27-92 Pull pkr & set 6408'. Brk form @ 2900 psi. Pmp spot acid away @ 1.8 BPM @ 2700 psi  
Opn bypass. Acidize w/1000 gal 7-1/2% NE/FE + Clay stay & 20 balls. Avg rate 3 BPM @ 3000 psi.

2-28-92 Install chk. Lft flwg overnight on 12/64" chk. FTP=85 psi.

3-2-92 SITP = 425 PSI. Opn on 20/64" chk. FTP = 150 PSI. Cont to flow

ACCEPTED FOR RECORD

14. I hereby certify that the foregoing is true and correct

Signed Sharon J. Kene

Title Production Analyst

MAR 12 1992 3/3/92

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Conditions of approval, if any:

Title \_\_\_\_\_

CARLSBAD, NEW MEXICO

Exhibit X2.

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

5. Lease Designation and Serial No.

NM-17807

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Anadarko Federal #1

9. API Well No.

10. Field and Pool, or Exploratory Area

Corbin Delaware, West

11. County or Parish, State

Lea County, NM

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Manzano Oil Corporation

3. Address and Telephone No.

P.O. Box 2107, Roswell, NM 88202-2107

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 660' FEL  
Section 15, T18S, R32E

**12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

**TYPE OF SUBMISSION**

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

**TYPE OF ACTION**

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multi-perforation on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

4-10-92 Frac well w/16k gal + 47k# 20/40 Ottawa sand.  
4-15-92 Pmpg. 138 BSW/19 hrs. No oil cut.  
4-23-92 0 BO + 111 BW. Sample showing zero oil cut.  
4-29-92 Perf 5856-62 = 6' = 12 holes and 5865-70 = 5' = 10 holes.  
4-30-92 Acidized w/1500 gallons 20% NE/FE + 33 balls. Swab dry w/tr oil on 6th swab run.  
5-01-92 50' fluid in hole - Rec 5 gal - 100% oil. Perf 5177-5225 = 19 holes overall.  
5-02-92 Acidize w/1500 gal 15% NE/FE + 33 balls. Swab well dry in 4 runs.  
5-03-92 SITP (14 hrs) 20 psi. Had 100' entry. 1st swab run recovered 50' - 50% oil cut. Wait 1 hr - no entry - no recovery.  
5-04-92 SI Sunday. This a.m. SITP (45 hrs) = 25 psi. 1st swab run 300' in hole. Recovered 200' - 75% oil. 2nd swab run - no recovery. Make 1 swab run per hour. 1st hour - no entry. 2nd hr - no entry.  
5-06-92 Perf 4958-65 = 7' = 2 spf = 14 holes.  
5-07-92 Acidize w/1000 gallons 10% NE/FE + clay stay & 24 balls. Swab dry in 5 runs.  
5-08-92 Swab down in 3 runs. Wait one hour - make one swab run/hr. 5th hr - FL 4500' Scattered to SN - No rec.  
5-13-92 Perf Qn Sand 3924-34 = 10' w/2 spf.  
5-14-92 Acidize w/1400 gal 15% NE/FE + 30 balls. Sawb well down in 4 swab runs (over)

14. I hereby certify that the foregoing is true and correct

Signed William K. Kasey Title Production Analyst Date May 15, 1992

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

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

\*See instruction on Reverse Side



5-14-92 (Cont) Make 1 swab run per hour for 5 hrs. Recovered 10-15' LW per hour.  
5-15-92 TA.

MANZANO OIL CORPORATION  
APPLICATION FOR AUTHORIZATION TO INJECT  
ANADARKO FEDERAL #1  
LEA COUNTY, NEW MEXICO

CERTIFICATE OF SERVICE

I, Donnie E. Brown, Engineer, Manzano Oil Corporation, Operator of the Anadarko Federal #1, have on this 2nd day of June, 1992, mailed or caused to be mailed, postage prepaid a copy of the Application for Authorization to Inject to the following persons at the address shown:

LAND OWNER

Bureau of Land Management  
Carlsbad Resource Area Headquarters  
P.O. Box 1778  
Carlsbad, New Mexico 88220

GRAZING LESSEE

Herschel and Gary Caviness  
c/o Caviness Cattle Company  
East Star Route  
Maljamar, New Mexico 88264

OFFSET OPERATORS

Dan Kernaghan, DM Oper.  
Anadarko Petroleum Corp.  
P.O. Box 2497  
Midland, Texas 79702

M.R. Burton, DM Oper.  
Santa Fe Energy Resources, Inc.  
550 W. Texas, Suite 1330  
Midland, Texas 79701


Brent D. Meyers, DM Oper.  
Conoco, Inc.  
10 Desta Dr., Suite 100 W.  
Midland, Texas 79705-4500

Harold Justice, VP Drlg/Prod.  
Siete Oil & Gas Corp.  
P.O. Box 2523  
Roswell, New Mexico 88202-2523

C.R. Chandler, VP Oper.  
Marshall & Winston, Inc.  
P.O. Box 50880  
Midland, Texas 79710

C.W. Stumhoffer  
Ridglea Bank Bldg, Suite 1007  
Ft. Worth, Texas 76116

J.S. Buchanan, VP Reg. Oper.  
Meridian Oil, Inc.  
P.O. Box 51810  
Midland, Texas 79710-1810

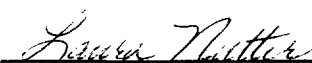
  
Donnie E. Brown, VP Engineering

State of New Mexico    )  
                                  )  
County of Chaves        )

The foregoing instrument was acknowledged before me this 2nd day of June, 1992 by Donnie E. Brown, Vice President of Engineering, Manzano Oil Corporation, on behalf of said corporation.

My commission expires:

June 6, 1995

  
Notary Public in and for the  
State of New Mexico



## AFFIDAVIT OF PUBLICATION

State of New Mexico,  
County of Lea.

I, Kathi Bearden

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

of \_\_\_\_\_

One weeks.  
Beginning with the issue dated

June 7, 1992  
and ending with the issue dated

June 7, 1992

*Kathi Bearden*  
General Manager

Sworn and subscribed to before

me this 11 day of

June, 1992  
*Paula Parrish*  
Notary Public.

My Commission expires \_\_\_\_\_

Aug. 5, 1995  
(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.

**LEGAL NOTICE**  
June 7, 1992

Manzano Oil Corporation proposed to convert the Anadarko Federal #1 well from an oil well to a water disposal well. The Anadarko Federal #1 is

located 1980' FSL & 660' FEL of Section 15, Township 18 South, Range 32 East, N.M.P.M., Lea County, New Mexico.

800 barrels of water per day maximum shall be injected at 1300 psi into the

Delaware Mountain Group at a depth of 4958 - 6485 feet. Interested parties must file objections or request a hearing with the New Mexico Oil Conservation Division P.O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

Madarko #1  
Return Receipt  
Sec. 15, T185, R35E  
Cora County, NM

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:  
Hobbs Daily Sun  
P. O. Box 860  
Legal Dept.  
Hobbs, NM 88241-0860

4. Article Number  
P 340 896 274

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
X *Glenda Perry*

6. Signature - Agent  
X

7. Date of Delivery  
6-4-92

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989

★ U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:  
Bureau of Land Management  
Carlsbad Resource Area Headquarters  
P. O. Box 1778  
Carlsbad, NM 88220

4. Article Number  
P 340 896 270

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
X

6. Signature - Agent  
X *Betty Hill*

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989

★ U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  
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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:  
Herschel and Gary Caviness  
c/o Caviness Cattle Company  
East Star Route  
Maljamar, NM 88264

4. Article Number  
P 340 896 271

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
X *Janice Caviness*

6. Signature - Agent  
X *Janice Caviness*

7. Date of Delivery  
6-6-92

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989

★ U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Anadarko  
BX 2497  
Midland TX 79702

4a. Article Number

P-340-896-273

4b. Service Type

- ☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Signature (Addressee)

6. Signature (Agent)

Belle Plaine

PS Form 3811, November 1990 \*U.S. GPO: 1991-287-066

**DOMESTIC RETURN RECEIPT**

<b>SENDER:</b> Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.	
1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge)	2. <input type="checkbox"/> Restricted Delivery (Extra charge)
3. Article Addressed to: Brent Meyers, Dm Oper Conoco Inc. 10 Desta Dr., Ste. 100 W Midland, TX 79705-4500	4. Article Number P340 896 265
5. Signature - Addressee X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X <i>Imita Morales</i>	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
7. Date of Delivery 6-3-92	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989 \*U.S.G.P.O. 1989-238-815

**DOMESTIC RETURN RECEIPT**

<b>SENDER:</b> Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.	
1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge)	2. <input type="checkbox"/> Restricted Delivery (Extra charge)
3. Article Addressed to: C.A. Chandler, VP Oper Marshall & Winston, Inc. P.O. Box 50880 Midland, TX 79710	4. Article Number P 340 896 272
5. Signature - Addressee X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X <i>P. Waters</i>	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
7. Date of Delivery JUL 3 1992	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989 \*U.S.G.P.O. 1989-238-815

**DOMESTIC RETURN RECEIPT**

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: J. S. Buchanan, VP Reg. Oper. Meridian Oil, Inc. P. O. Box 51810 Midland, TX 79710-1810	4. Article Number P 340 896 269
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery APR 4 1989	

PS Form 3811, Apr. 1989

\*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: M.R. Burton, Dm oper. Santa Fe Energy Resources 550 W. Texas, Ste. 1330 Midland, TX 79701	4. Article Number P 340 896 266
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Addressee X <i>P. Shuman</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery APR 3 1989	

PS Form 3811, Apr. 1989

\*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Harold Justice IVP Dr/g. Siete Oil & Gas P.O. BOX 2523 Roswell, NM 88202-2523	4. Article Number P 340 896 268
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Addressee X <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery APR 4 1989	

PS Form 3811, Apr. 1989

\*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  
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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: C.W. Stumhoffer Ridglea Bank Bldg. Suite 1007 Ft. Worth, TX 76116	4. Article Number P 340 896 267 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee X   C.W. Stumhoffer	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 6-8-92	