

0; JUL 23 FH 1: 16

July 20, 2001

(30-015-31557)

New Mexico Energy, Minerals & Natural Resources Department Oil Conservation Division 1220 South Saint Francis Street Santa Fe. New Mexico 87504

Attention: Engineering Bureau

RE:

Durango "15" State Com #1

660' FNL - 660' FWL, Section 15-17S-29E

Eddy County, New Mexico

Gentlemen:

Enclosed herewith, is the Marbob Energy Corporation Application for Authorization to Inject concerning the above referenced well. Application is made pursuant to Rule 701C of the Division Rules and Regulations for Administrative Approval for Disposal into the Cisco formation. The waters to be disposed of will consist of produced waters from the Seven Rivers, Grayburg, San Andres, and Yeso/Paddock formations. There were no fresh water wells found within one mile of the proposed salt water disposal well. Publication of Marbob's intent to utilize the subject well for water disposal has been made in the Artesia Daily press, and copies of this Application have been mailed to each leasehold operator and surface owner within one half mile of the well via certified mail.

Marbob Energy Corporation respectfully request your approval of the before mentioned Application at the expiration of the fifteen day waiting period. If you find further information is needed, please contact Brian Collins in our office.

Sincepely.

Dean Chumbley Land Department

DC/mm Enclosures ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -

ADMINISTRATIVE APPLICATION COVER SHEET

т	HIS COVERSHEET IS	MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATION					
Application Acronyms: [NSP-Non-Standard Proration Unit] [NSL-Non-Standard Location] [DD-Directional Drilling] [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-Sait Water Disposal] [IPI-Injection Pressure Increase] [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]							
[1]	TYPE OF AI [A]	PPLICATION - Check Those Which Apply for [A] Location - Spacing Unit - Directional Drilling NSL NSP DD D SD					
	Check [B]	Cone Only for [B] and [C] Commingling - Storage - Measurement DHC CTB PLC PC OLS OLM					
	[C]	Injection - Disposal - Pressure Increase - Enhanced Oil Recovery WFX PMX SWD IPI EOR PPR					
[2]	NOTIFICAT	TION 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]	INFORMAT	TON / DATA SUBMITTED IS COMPLETE - Statement of Understanding					
I her	ehy certify that	I, or personnel under my supervision, have read and complied with all applicable Rul					

I hereby certify that I, or personnel under my supervision, have read and complied with all applicable Rules and Regulations of the Oil Conservation Division. Further, I assert that the attached application for administrative approval is accurate and complete to the best of my knowledge and where applicable, verify that all interest (WI, RI, ORRI) is common. I understand that any omission of data (including API numbers, pool codes, etc.), pertinent information and any required notification is cause to have the application package returned with no action taken.

Note: Statement must be completed by an individual with supervisory capacity.

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION APPLICATION FOR ADMINISTRATIVE APPROVAL MARBOB ENERGY CORPORATION APPLICATION FOR AUTHORIZATION TO INJECT

DURANGO 15 STATE NO. 1

TABLE OF CONTENTS

Application	Form C-108
Section III - XIII	Attachment I
Area of Review Map	Attachment V
Area of Review Data	Attachment VI
Affirmative Statement	Attachment II
Proof of Public Notification	Attachment III
Proof of Offset Operators Notification	Attachment VIII

OIL CONSERVATION DIVISION 2040 SOUTH PACHECO SANTA FE, NEW MEXICO 87505

FORM C-108 Revised 4-1-98

APPLICATION FOR AUTHORIZATION TO INJECT

I.	PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage Application qualifies for administrative approval? Yes No					
II.	OPERATOR: Marbob Energy Corporation					
	ADDRESS: P. O. Box 227, Artesia, NM 88211-0227					
	CONTACT PARTY: Brian Collins PHONE: 505-748-3303					
III.	WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.					
IV.	Is this an expansion of an existing project? Yes X No If yes, give the Division order number authorizing the project:					
V.	Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.					
VI.	Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.					
VII.	Attach data on the proposed operation, including:					
	 Proposed average and maximum daily rate and volume of fluids to be injected; Whether the system is open or closed; Proposed average and maximum injection pressure; Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and, 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: Brian Collins TITLE: Engineer					
	SIGNATURE: DATE: 20 July 01					
*	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:					
DISTE	Delta Wing Federal #1 SWD Administrative Order SWD-643 17 September 1996 UBUTION: Original and one copy to Santa Fe with one copy to the appropriate District Office					

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, 2040 South Pacheco, Santa Fe, New Mexico 87505, within 15 days.

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

Marbob Energy Corporation

OPERATOR:

660' FNL - 660' FWL

WELL LOCATION:

WELL NAME & NUMBER:

WELLBORE SCHEMATIC

Wellbore Schematic

See Attached

 \mathfrak{t}_3 \mathfrak{t}^3 Method Determined: Cmt. Bond Log SX. Method Determined: Circ 18 sx. Method Determined: Circ 100 RANGE 29E Casing Size: 13 3/8" 5 1/2" 9 5/8" (Perforated or Open Hole; indicate which) WELL CONSTRUCTION DATA TOWNSHIP Intermediate Casing Casing Size: Casing Size: Production Casing Injection Interval sx. or 17S SX. or Surface Casing sx. or feet to SECTION 15 Surface Surface 1050 Top of Cement: 1800' 109001 Cemented with: 1685 375 7 7/8" Hole Size: 12‡" Hole Size: 17½" Top of Cement: Cemented with: Cemented with: Top of Cement: 8750 Total Depth: Hole Size: UNIT LETTER 0 Durango 15 State #1 FOOTAGE LOCATION

INJECTION WELL DATA SHEET

٥	4.	\dot{n}	2.	· -		Tubin Type Packe Other
injection zone in this area: Underlying: Morrow Overlying: Yeso, San Andres	Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. Chester 10722-46' CIBP + 35' cmt @ 10700'; Morrow 10602-51' CIBP + 35' cmt @ 10550'; Atoka 10286-91' CIBP + 35' cmt @ 10200'; Canyon 9225-47' CIBP + 35' cmt @ 9180'.	Name of Field or Pool (if applicable): -	Name of the Injection Formation: Cisco	Is this a new well drilled for injection? Yes X No If no, for what purpose was the well originally drilled? Oil and Gas Exploration	Additional Data	Tubing Size: 2 7/8" Lining Material: Plastic Type of Packer: Nickel plated double-grip retrievable Packer Setting Depth: 8700' Other Type of Tubing/Casing Seal (if applicable): N/A

APPLICATION FOR AUTHORIZATION TO INJECT MARBOB ENERGY CORPORATION

DURANGO 15 STATE NO. 1

VII: Injection Well Data

- 1. Proposed Rate of Injection:
 - 1. Average daily rate of injection: 5,000 barrels
 - 2. Maximum daily rate of injection: 15,000 barrels
- 2. Type of System:

System will be closed

3. Anticipated Injection Pressure:

Proposed maximum injection pressure = 1750 psi (0.2 psi/ft. x 8750' ft. = 1750 psi)

4. Source of Injection Water:

Refer to Administrative Order SWD-643

5. Disposal Zone Water Analysis:

Refer to Administrative Order SWD-643 dated 17 September 1996

VIII Geologic Data

Refer to Administrative Order SWD-643

IX Proposed Conversions / Stimulation Program

Will probably acidize Cisco interval 8750 – 8900' with 20,000 to 30,000 gallons 20% HCl acid.

X Logging Data

A copy of the porosity log across the injection interval is attached

XI Fresh Water Analysis

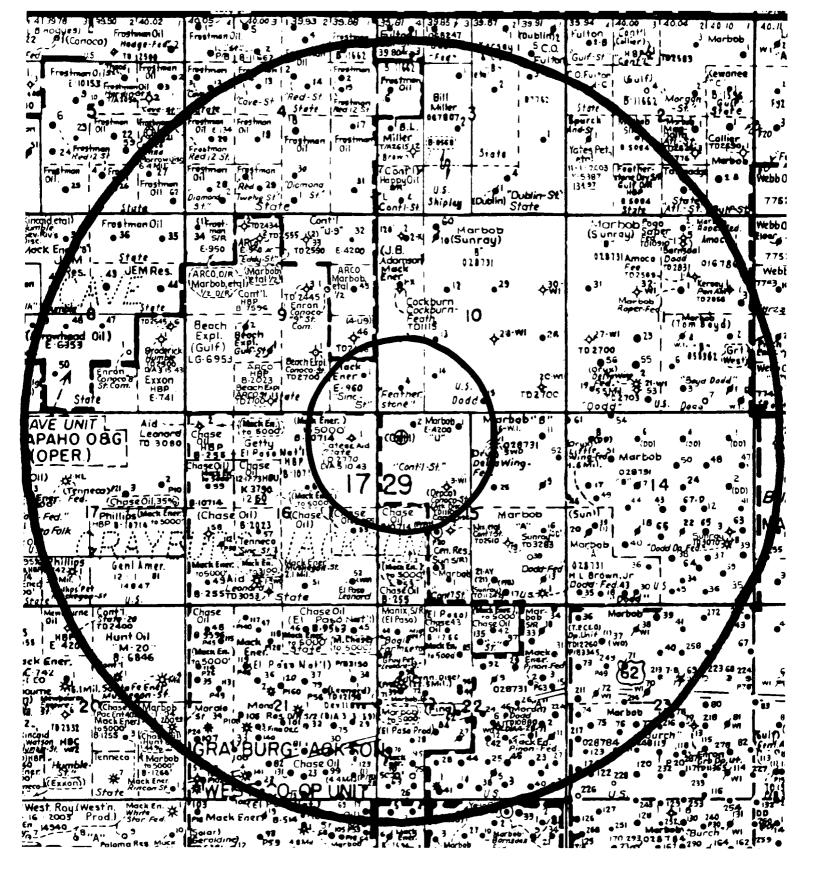
Administrative Order SWD-643

XII Open Faults

There is no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.

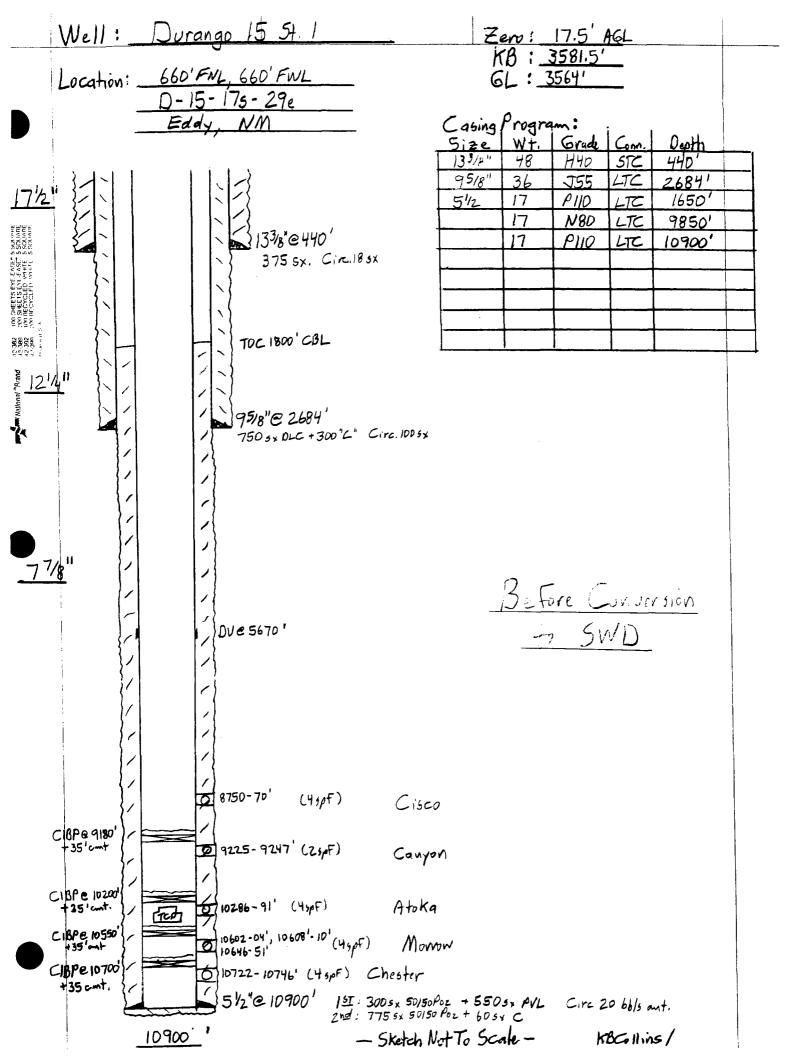
XIII Proof of Notice

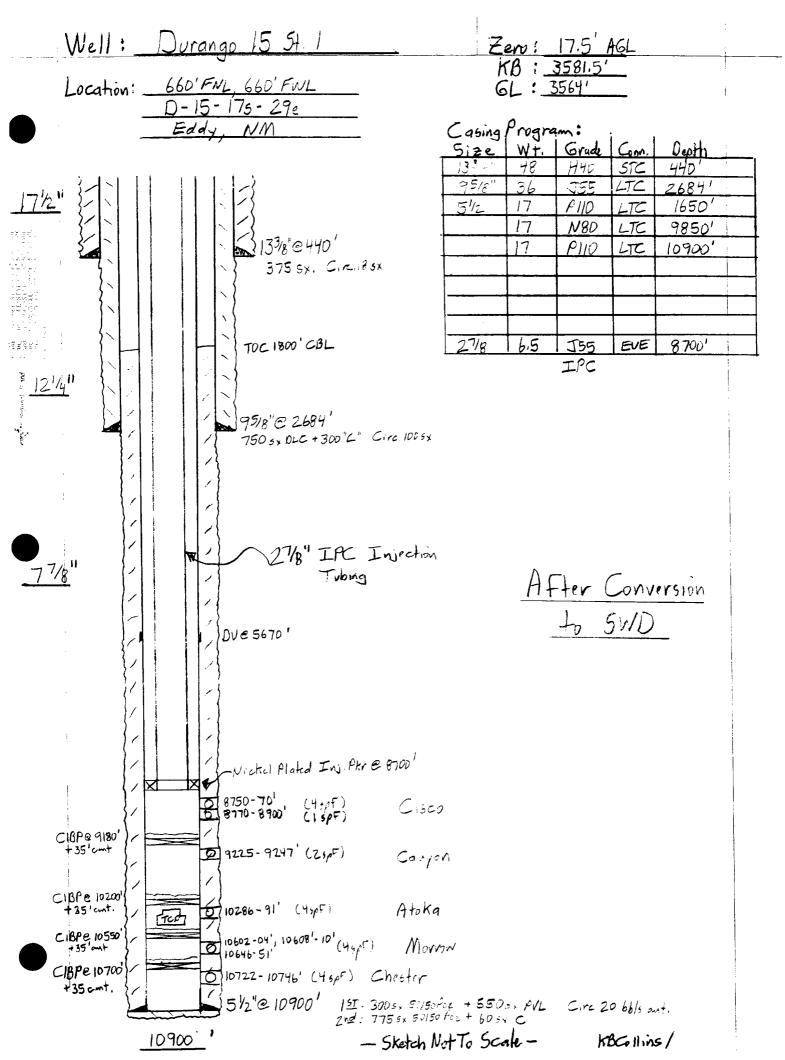
Proof of notice is attached

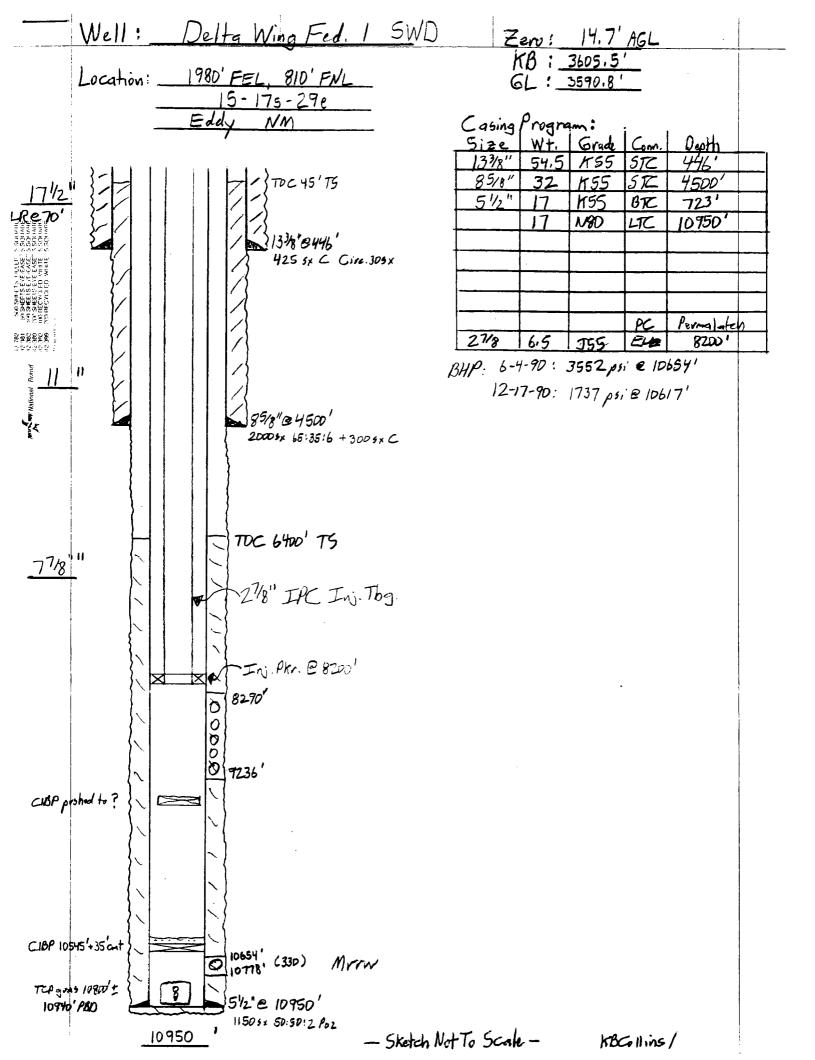


Area of Review Plat for

Durango "15" State Com No. 1
660' FNL - 660' FWL
Section 15, Township 17 South, Range 29 East
Eddy County, New Mexico







APPLICATION FOR AUTHORIZATION TO INJECT MARBOB ENERGY CORPORATION

DURANGO 15 STATE NO. 1

AFFIRMATIVE STATEMENT

I have examined all geologic and engineering data available for the Loco Hills field and find no evidence of open faults and other hydrologic connection between the disposal zone and any underground drinking water sources.

Name:	Martin Joyce	Date:7/	20/01	
Signature: _	Mailin Paya	Title:	Geologist	

ARTESIA DAILY PRESS LEGAL NOTICES

Marbob Energy Corporation, Post Office Box 227, Artesia, New Mexico 88211-0227 has filed Form C-108 (Application for Authorization to Inject) with the New Mexico Oil Conservation Division seeking administrative approval for a salt water disposal well. The proposed well, the Durango 15 State Com No. 1 is located 660' FNL and 660' FWL, Section 15, Township 17 South, Range 29 East, Eddy County, New Mexico. Disposal water will be sourced from area wells producing from the Seven Rivers. Grayburg, San Andres, and Yeso formations. The disposal water will be injected into the Cisco formation at a depth 8,750' - 8,900' at a maximum surface pressure of 1750 psi and a maximum rate of 15,000 BWPD. Any interested party who has an objection to this must give notice in writing to the Oil Conservation Division, 1220 South Saint Francis Street, Santa Fe, New Mexico 87505 within fifteen (15) days of this notice. Any interested party with questions or comments may contact Brian Collins at Marbob Energy Corporation, Post Office Box 227, Artesia, New Mexico 88211-0227 or call 505/748-3303.

Published in the Artesia Daily Press, Artesia, New Mexico, 1998.

SENDER: COMPLETE TO SELECTION OF THE PROPERTY OF THE PROPERTY

SENDER: COMPLETE TO THE THIRD COMPLETE THIS COMPLETE THE COMPLETE THE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received by (Please Print Clearly) B. Date of Deliv
so that we can return the card to you.	C. Signature ☐ Agent
Attach this card to the back of the mailpiece, or on the front if space permits.	X □ Addres
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Conoco, Inc.	The state of the s
10 Desta Drive	
Midland, TX 79705	
nzazana, zn 75703	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchand ☐ Insured Mail ☐ C.O.D.
Durango 15 Fed #1 Inj.	4. Restricted Delivery? (Extra Fee) ☐ Yes
- - 7001 0320 0001 7640 3475	
0011	Return Receipt 102595-00-M-09
Sometie.	10255-00-111-03
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Received by (Please Print Clearly) B. Date of Deliv
Print your name and address on the reverse so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece,	☐ Agent
	X Address
or on the front if space permits.	D. Is delivery address different from item 1? Yes
Article Addressed to:	☐ Addres
1. Article Addressed to: BP Permian Business Unit	D. Is delivery address different from item 1? Yes
BP Permian Business Unit P O Box 3092	D. Is delivery address different from item 1? Yes
1. Article Addressed to: BP Permian Business Unit	D. Is delivery address different from item 1? Yes
BP Permian Business Unit P O Box 3092	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Certified Mail Express Mail
BP Permian Business Unit P O Box 3092	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type
BP Permian Business Unit P O Box 3092	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 Merchand
P O Box 3092 Houston, TX 77253	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 Merchand Insured Mail C.O.D.
P. Article Addressed to: BP Permian Business Unit P O Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468	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 Merchand Insured Mail C.O.D.
P. Article Addressed to: BP Permian Business Unit P O Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
P. Article Addressed to: BP Permian Business Unit P O Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Return Receipt 102595-00-M-09
Posticle Addressed to: BP Permian Business Unit Post 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic Form 4 if Restricted Delivery is desired.	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
Print your name and address on the reverse so that we can return the SENDER: 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.	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery C. Signature
Print your name and address on the reverse	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Address C. Signature X Agent Address
Print your name and address on the reverse so that we can return the card to you. Article Addressed to: BP Permian Business Unit P 0 Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Possible Certified Mail Express Mail Registered Return Receipt for Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Agent
Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F 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.	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Address C. Signature X Agent Address D. Is delivery address different from item 1? Yes
Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic Form 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.	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Address C. Signature X Agent Address D. Is delivery address different from item 1? Yes
Permian Business Unit P O Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F 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. Article Addressed to: Chase 0il Corporation P O Box 1767	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 Merchand Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Address C. Signature X Agent Address D. Is delivery address different from item 1? Yes
Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F 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. Article Addressed to: Chase Oil Corporation	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type
Permian Business Unit P O Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F 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. Article Addressed to: Chase 0il Corporation P O Box 1767	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type
Permian Business Unit P O Box 3092 Houston, TX 77253 Durango 15 Fed #1 Inj. 7001 0320 0001 7640 3468 PS Form 3811, July 1999 Domestic F 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. Article Addressed to: Chase 0il Corporation P O Box 1767	D. Is delivery address different from item 1?

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. Article Addressed to: E.O.G. Resources P O Box 2267 	A. Received by (Please Print Clearly) B. Date of Delive C. Signature X
Midland, TX 79702 Durango 15 Fed #1 Inj.	3. Service Type Certified Mail
2 7001 0320 0001 7640 3444	<u> </u>
	turn Receipt 102595-00-M-095
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delive C. Signature Agent Address
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.	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) C. Signature Agent
 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: 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Deliver C. Signature X
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. Article Addressed to: New Mexico State Land Office	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Deliver C. Signature X
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. Article Addressed to: New Mexico State Land Office P O Box 1148	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) C. Signature X
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. Article Addressed to: New Mexico State Land Office P 0 Box 1148 Santa Fe, NM 87504-1148	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X

.

New Mexico Oil Conservation Division—Enginnering Bureau Administrative Application Process Documentation

Date Application Rec	7/23/01			
Date of Preliminary l		-	7/25/01	
(Note: Must be withi	n 10-days of received da	te)		
Results:	Application Complet	re	_Application I	icomplete
Date Incomplete Lett	er Sent:	_	7/25/01	
Deadline to Submit R	Requested Information:	_	Stiloi -	Leca Stilot
Phone Call Date:		_	8/2/01	
(Note: Only applies i	s requested data is not s	ubmitted wi	thin the 7-day d	eadline)
Phone Log Complete	d?	_Yes _	No	
Date Application Pro	cessed:	-		
Date Application Ret		-		
•	resort & only after repe	-	ots by the Divisio	n to obtain