

PKRVO21353 9607

SWD

5/27/02

## MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen  
Direct Dial: (505) 986-2538  
powen@montand.com

Post Office Box 2307  
Santa Fe, New Mexico 87504-2307  
325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289  
www.montand.com

May 7, 2002

**HAND-DELIVERED**

Lori Wrotenbery, Director  
Oil Conservation Division  
New Mexico Department of Energy,  
Minerals and Natural Resources  
1220 South St. Francis Drive  
Santa Fe, New Mexico 87505

02 MAY -7 PM 4:32  
02 MAY -7 PM 4:32

Re: ***Administrative Application of Duke Energy Field Services, LP for  
Authorization to Inject, Eddy County, New Mexico***

Dear Ms. Wrotenbery:

Enclosed in triplicate is a form C-108, Application for Authorization to Inject, from Duke Energy Field Services, LP ("Duke Energy"). Duke Energy requests that this application be approved in as expeditious a manner as possible.

7 The enclosed application seeks authorization for Duke Energy to inject up to 800 bpd of acid gas (62.66% vol. CO<sub>2</sub>, 35.10% vol. H<sub>2</sub>S, 2.24% vol. other) into Duke Energy's proposed Duke AGI Well No. 1, to be located 1232 feet from the South line and 1927 feet from the East line of Section 17, Township 18 South, Range 28 East, NMPM, Eddy County, New Mexico. The acid gas will be injected into the Devonian formation. The acid gas is a byproduct of gas processing at Duke Energy's Artesia Gas Plant. The proposed disposal line from the gas plant to the disposal well, and the tubing in the well, will be compatible with standard sour gas production practices in the area.

The waste effluent to be injected is substantially similar to that injected into the same interval by Marathon Oil Company in its nearby Indian Basin Gas Com Well No. 1 in Section 23, Township 21 South, Range 23 East. Marathon's injection has been approved by the Division's Second Amendment of Division Order SWD-416, dated April 12, 2000.

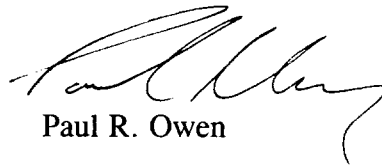
Duke Energy has provided notice of the application, by certified U.S. Mail, return receipt requested, to each leasehold operator within one-half mile of the proposed well location. Duke Energy is the owner of the surface on which the proposed well is to be drilled. In addition, the legal notices should be published in the next edition of both the Artesia Daily Press and the Carlsbad Current-Argus. I will forward the affidavits of publication from those newspapers as

Lori Wrotenbery, Director  
Oil Conservation Division  
May 7, 2002  
Page 2

soon as I receive them.

Duke Energy will submit any additional information as you direct in order to expedite your consideration of the enclosed application. Please let me know if there is anything that I can do to assist you with your consideration of this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "Paul R. Owen", with a stylized, flowing script.

Paul R. Owen

Enclosures

cc: Mr. Richard L. Griffith  
Mr. Russell Bentley  
Mr. Steve Miller

**APPLICATION FOR AUTHORIZATION TO INJECT**

I. PURPOSE: \_\_\_\_\_ Secondary Recovery \_\_\_\_\_ Pressure Maintenance   X   Disposal \_\_\_\_\_ Storage  
Application qualifies for administrative approval? \_\_\_\_\_ Yes \_\_\_\_\_ No

II. OPERATOR: DUKE ENERGY FIELD SERVICES, LP

ADDRESS: 3300 North "A", Bldg. Seven, Midland, TX 79705-5421

CONTACT PARTY: A.B. Glasgow

PHONE: (915) 620-4105

III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.  
Additional sheets may be attached if necessary.

IV. Is this an expansion of an existing project? \_\_\_\_\_ Yes   X   No  
If yes, give the Division order number authorizing the project: \_\_\_\_\_

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

\*VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

\*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).

\*XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

NAME: A.B. Glasgow

TITLE: Operations V.P. - Western Division

SIGNATURE: Albert B. Glasgow

DATE: 5/6/02

\* 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.

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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

OPERATOR: Duke Energy Field ServicesWELL NAME & NUMBER: Duke AGI #1WELL LOCATION: 1232' FSL, 1927' FEL,  
FOOTAGE LOCATION 0 7 18S 28E  
UNIT LETTER  SECTION  TOWNSHIP  RANGE (Proposed) WELL SCHEMATIC(Proposed) WELL CONSTRUCTION DATA  
Surface Casing

## DUKE ENERGY FIELD SERVICES

AGI NO. 1

SE 1/4 ST.-T18S-R28E  
EDDY COUNTY, NEW MEXICO  
PROPOSED WELLBORE DIAGRAM AND WELL INFORMATION

| CASING                         | HOLE SIZE | TVD     | MD      | TOC    | LOGS           |
|--------------------------------|-----------|---------|---------|--------|----------------|
| 20" .025" wall                 | 24"       | 45'     | 45'     | Surf   | None           |
| 13 3/8" .48 pf<br>J-55, ST & C | 17 1/2"   | 500'    | 500'    | Surf   | None           |
| 9 5/8" .40.5 pf<br>J-55, LT&C  | 12 1/4"   | 2,500'  | 2,500'  | Surf   | None           |
| 7" .26 pf<br>L-80, LT&C        | 8 3/4"    | 11,500' | 11,500' | 9,500' | AT/ID/TC/L/M/L |

Hole Size: 17 1/2" Casing Size: 13 3/8"  
Top of Cement: Surface Method Determined: VisualIntermediate CasingHole Size: 12 1/4" Casing Size: 9 5/8"  
Cemented with: 855 sx. or  ft<sup>3</sup>  
Top of Cement: Surface Method Determined: VisualProduction CasingHole Size: 8 1/2" Casing Size: 7"  
Cemented with: 250 sx. or  ft<sup>3</sup>  
Top of Cement: 9,500 ft Method Determined: CBL  
Total Depth: 11,500 ftInjection Interval11,200 to 11,500  
 feet 

(Perforated or Open Hole; indicate which)

INJECTION WELL DATA SHEET

Tubing Size: 2 3/8", 4.7 ppf, L-80 Lining Material: Plastic Coated

Type of Packer: Baker Model "DB" Retrievable Production Packer

Packer Setting Depth: \_\_\_\_\_

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

Additional Data

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

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

2. Name of the Injection Formation: Devonian

3. Name of Field or Pool (if applicable): \_\_\_\_\_

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

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: Morrow (9874), Wolfcamp (7025), Abo (6040), Yeso (4092)

San Andres (2210), Grayburg (1888), Queen (1350)

## Attachment II

### Section VI

There are no Devonian wells within two miles of the proposed location.

### Section VII

- 1) Proposed average injection rate: 600 bpd; Proposed maximum injection rate: 800 bpd.
- 2) At the Devonian horizon the reservoir is a closed system. The overlying Woodford Shale provides an excellent seal from the above formations. The closest Devonian penetration is 13,000 feet to the west of the proposed location and is the Amoco DH Federal #1 located at SW/4 of 11-18S-27E. There has been no production from the Devonian in the well's area of review.
- 3) Proposed average injection pressure: 1400 psi; Proposed maximum injection pressure: 2,000 psi.
- 4)

| Component        | Mol %  |
|------------------|--------|
| Nitrogen         | 0.04   |
| Carbon Dioxide   | 62.66  |
| Methane          | 1.75   |
| Ethane           | 0.12   |
| Propane          | 0.13   |
| Iso-Butane       | 0.01   |
| Normal Butane    | 0.01   |
| Iso-Pentane      | 0.00   |
| Normal Pentane   | 0.00   |
| Hexane +         | 0.18   |
| Hydrogen Sulfide | 35.10  |
| Total            | 100.00 |

- 5) There are no Devonian penetrations within one mile of the proposed location. No chemical analysis is presently available for the injection zone. A sample will be taken and submitted at the time of completion. A review of fresh water in the well's area of review indicates that the Ogallala is a fresh water-bearing zone at approximately 250-ft.

### Section VIII

Geologic name: Devonian Limestone  
Lithology: Dolomitic Limestone  
Thickness: 350'-400'  
Depth: 11,200', -7600' subsea

**Section IX**

Not Applicable

**Section X**

No logs or test data is presently available for the proposed well. The logs and test data will be submitted at the time of completion.

**Section XII**

Duke Energy Field Services, LP has examined available geologic and engineering data. Duke finds no evidence of open faults or any other hydrologic connection between the proposed disposal zone (Devonian) and any underground source of drinking water.

**Section XIII**

Duke Energy Field Services, LP is the owner of the land on which the well is to be located, and a copy of this application has been sent by certified U.S. Mail, return receipt requested, to each leasehold operator within one-half mile of the proposed well location.



MONTGOMERY & ANDREWS  
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[powen@montand.com](mailto:powen@montand.com)

May 8, 2002

Post Office Box 2307  
Santa Fe, New Mexico 87504-2307  
325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

B&W Oil Company, Inc.  
R-252 North Haldeman Road  
Artesia, NM 88210

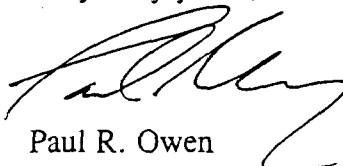
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You must file objections or requests for hearing with the Oil Conservation Division, 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505, within fifteen (15) days of the date of this letter.

Very truly yours,



Paul R. Owen  
Attorney for Duke Energy Field Services, LP

PRO/jr  
Enclosure

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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 will show to whom the article was delivered and the date delivered.

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:

B&W Oil Company, Inc.  
R-252 North Haldeman Road  
Artesia, New Mexico 88210

4a. Article Number

7001-1140-0002-5605-8642

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

5-10-02

5. Received By: (Print Name)

Riley J. Smith  
Belen J. Smith

6. Signature: (Addressee or Agent)

X

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

Thank you for using Return Receipt Service.

MONTGOMERY & ANDREWS

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Kersey & Company  
808 West Grand  
Artesia, New Mexico 88210

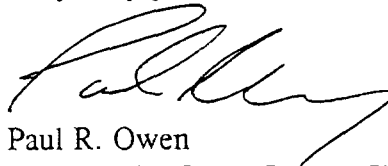
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Very truly yours,



Paul R. Owen  
Attorney for Duke Energy Field Services, LP

PRO/jr  
Enclosure

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only: No Insurance Coverage Provided)

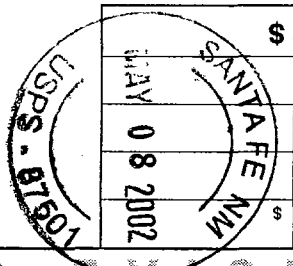
OFFICIAL USE

|   |    |
|---|----|
| Postage   | \$ |
| Certified Fee                                     |    |
| Return Receipt Fee<br>(Endorsement Required)      |    |
| Restricted Delivery Fee<br>(Endorsement Required) |    |
| Total Postage & Fees                              | \$ |

**Sent To**  
Kersey & Company  
Street, Apt. No.:  
808 West Grand  
City, State, ZIP+4  
Atlesta, New Mexico 88210

PS Form 3800, January 2001 See Reverse for Instructions

7001 1140 0002 5605 8659



MONTGOMERY & ANDREWS

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Kersey & Company  
Post Office Box 1248  
Fredericksburg, Texas 78624

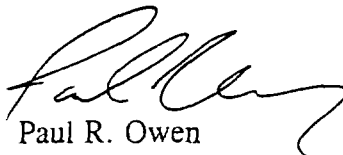
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Is your RETURN ADDRESS completed on the reverse side?

|   |  |   |  |
|---|--|---|--|
| <b>SENDER:</b> <ul style="list-style-type: none"><li>■ Complete items 1 and/or 2 for additional services.</li><li>■ Complete items 3, 4a, and 4b.</li><li>■ Print your name and address on the reverse of this form so that we can return this card to you.</li><li>■ Attach this form to the front of the mailpiece, or on the back if space does not permit.</li><li>■ Write "Return Receipt Requested" on the mailpiece below the article number.</li><li>■ The Return Receipt will show to whom the article was delivered and the date delivered.</li></ul> |  | I also wish to receive the following services (for an extra fee):<br>1. <input type="checkbox"/> Addressee's Address<br>2. <input type="checkbox"/> Restricted Delivery<br>Consult postmaster for fee.  |  |
| 3. Article Addressed to:<br><br>Kersey & Company<br>Post Office Box 1248<br>Fredericksburg, Texas 78624   |  | 4a. Article Number<br>7001-1140-0002-5605-8666  |  |
|   |  | 4b. Service Type<br><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified<br><input type="checkbox"/> Express Mail <input type="checkbox"/> Insured<br><input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD |  |
|   |  | 7. Date of Delivery<br>5-13-02  |  |
| 5. Received By: (Print Name)<br>Mr Kersey   |  | 8. Addressee's Address (Only if requested and fee is paid)  |  |
| 6. Signature: (Addressee or Agent)<br>X Mr Kersey   |  |   |  |

Thank you for using Return Receipt Service.

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Mack Energy Corporation  
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Artesia, New Mexico 88211-0960

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PRO/jr  
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Consult postmaster for fee.

3. Article Addressed to:

Mack Energy Corporation  
Post Office Box 960  
Artesia, New Mexico 88211-0960

4a. Article Number

7001-1140-0002-5605-8673

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

5-10-02

5. Received By: (Print Name)

C. Asher

6. Signature: (Addressee or Agent)

X C. Asher

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

Thank you for using Return Receipt Service.



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Marbob Energy Corporation  
324 West Main, Suite 103  
Artesia, New Mexico 88210

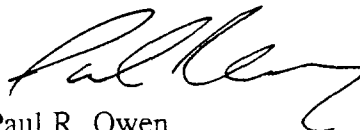
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This letter is to advise you that Duke Energy Field Services, LP has filed the enclosed application with the New Mexico Oil Conservation Division seeking administrative authorization to inject up to 800 bpd of acid gas, at a maximum pressure of 2,000 psi, into the Devonian formation between 11,200 feet to 11,500 feet, through Duke's proposed Duke AGI Well No. 1, to be drilled 1232 feet from the South line and 1927 from the East line of Section 7, Township 18 South, Range 28 East, NMPM, Eddy County, New Mexico. The proposed well is located approximately 13 miles southeast of Artesia, New Mexico.

You must file objections or requests for hearing with the Oil Conservation Division, 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505, within fifteen (15) days of the date of this letter.

Very truly yours,



Paul R. Owen  
Attorney for Duke Energy Field Services, LP

PRO/jr  
Enclosure

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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 will show to whom the article was delivered and the date delivered.

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:

Marbob Energy Corporation  
324 West Main, Suit 103  
Artesia, New Mexico 88210

4a. Article Number

7001-1140-0002-5605-8697

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

05-13-2002

5. Received By: (Print Name)

MISTI McLurg

6. Signature: (Addressee or Agent)

x MISTI McLurg

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

Thank you for using Return Receipt Service.

MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen  
Direct Dial: (505) 986-2538  
[powen@montand.com](mailto:powen@montand.com)

May 8, 2002

Post Office Box 2307  
Santa Fe, New Mexico 87504-2307  
325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

Marbob Energy Corporation  
Post Office Box 227  
Artesia, New Mexico 88211

Re: *Administrative Application of Duke Energy Field Services, LP for  
Authorization to Inject, Eddy County, New Mexico*

Gentlemen:

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Attorney for Duke Energy Field Services, LP

PRO/jr  
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1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Marbob Energy Corporation  
Post Office Box 227  
Artesia, New Mexico 88211

4a. Article Number

7001-1140-0002-5605-8680

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

05-13-2002

5. Received By: (Print Name)

MISTI McLurg

6. Signature: (Addressee or Agent)

x MISTI McLurg

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

[REDACTED ADDRESS]

Thank you for using Return Receipt Service.

MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen  
Direct Dial: (505) 986-2538  
[powen@montand.com](mailto:powen@montand.com)

May 8, 2002

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325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

Mewbourne Oil Company  
Post Office Box 5270  
Hobbs, New Mexico 88241

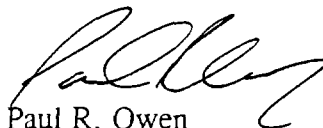
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Very truly yours,



Paul R. Owen  
Attorney for Duke Energy Field Services, LP

PRO/jr  
Enclosure

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2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mewbourne Oil Company  
Post Office Box 5270  
Hobbs, New Mexico 88241

4a. Article Number

7001-1140-0002-5605-8703

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

5-13-02

5. Received By: (Print Name)

Jackie Lathan

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

6. Signature: (Addressee or Agent)

Jackie Lathan

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen  
Direct Dial: (505) 986-2538  
[powen@montand.com](mailto:powen@montand.com)

May 8, 2002

Post Office Box 2307  
Santa Fe, New Mexico 87504-2307  
325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

Mewbourne Oil Company  
Post Office Box 7698  
Tyler, Texas 75711

Re: *Administrative Application of Duke Energy Field Services, LP for  
Authorization to Inject, Eddy County, New Mexico*

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PRO/jr  
Enclosure

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2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Newbourne Oil Company  
Post Office Box 7698  
Tyler, Texas 75711

4a. Article Number

7001-1140-0002-5605-9796

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input checked="" type="checkbox"/> Express Mail        | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

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

5. Received By: (Print Name)

HENRY GRANVILLE

6. Signature: (Addressee or Agent)

*Henry Granville*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.



MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

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[powen@montand.com](mailto:powen@montand.com)

May 8, 2002

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Santa Fe, New Mexico 87504-2307  
325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

Morexco, Inc.  
1211 West Chisum Avenue  
Artesia, New Mexico 88210

Re: *Administrative Application of Duke Energy Field Services, LP for  
Authorization to Inject, Eddy County, New Mexico*

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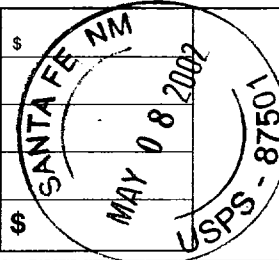
PRO/jr  
Enclosure

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only: No Insurance Coverage Provided)

7001 1140 0002 5605 9519

OFFICIAL USE

PRO Postage  
Certified Fee  
Return Receipt Fee  
(Endorsement Required)  
Restricted Delivery Fee  
(Endorsement Required)  
Total Postage & Fees



Postmark  
Here

Sent To Morexco Inc.  
Street, Apt. No.;  
or PO Box No. 1211 West Chisum Avenue  
City, State, ZIP+ 4 Artesia, New Mexico 88210

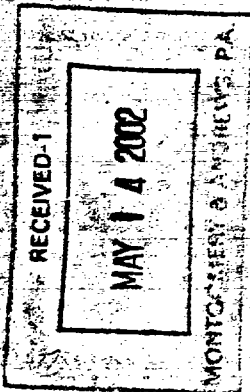
PS Form 3800, January 2001

See Reverse for Instructions

CERTIFIED MAIL



7001 1140 0002 5605 9519



*McNA*

1st CLASS  
2nd CLASS  
3rd CLASS

**MONTGOMERY & ANDREWS**  
PROFESSIONAL ASSOCIATION  
POST OFFICE BOX 2307  
SANTA FE, NEW MEXICO 87504-2307

Morexco Inc.  
1211 West Chisum Avenue  
Artesia, New Mexico 88210



- ☐ MOVED, LEFT NO ADDRESS
- ☐ NOT DELIVERABLE AS ADDRESSED
- ☐ UNABLE TO FORWARD
- ☐ ATTEMPTED - NOT KNOWN
- ☐ UNCLAIMED
- ☐ NO SUCH STREET - RETURN TO SENDER
- ☐ NO POSTAGE IN THIS ENVELOPE
- ☐ NO MAIL INSURANCE
- ☐ NO CLAIMS FOR DAMAGES

MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen  
Direct Dial: (505) 986-2538  
[power@montand.com](mailto:power@montand.com)

May 8, 2002

Post Office Box 2307  
Santa Fe, New Mexico 87504-2307  
325 Paseo de Peralta  
Telephone (505) 982-3873  
Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

Morexco, Inc.  
Post Office Box 481  
Artesia, New Mexico 88211

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PRO/jr  
Enclosure

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

PRO Postage

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees

\$

Postmark  
Here

Sent To

Morexco, Inc.

Street, Apt. No.,  
or PO Box No.

P.O. Box 481

City, State, ZIP+4

Artesia, NM 88211

PS Form 3800, January 2001

See Reverse for Instructions

CERTIFIED MAIL



7001 1140 0002 5605 9502

RECEIVED-1

MAY 14 2002



MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
POST OFFICE BOX 2307  
SANTA FE, NEW MEXICO 87504-2307

Morexco, Inc.  
Post Office Box 481  
Artesia, New Mexico 88211

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
ATTORNEYS AND COUNSELORS AT LAW

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[powen@montand.com](mailto:powen@montand.com)

May 8, 2002

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325 Paseo de Peralta  
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Fax (505) 982-4289

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

**CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED**

Mr. Marian C. Welch  
Welch W C  
Post Office Drawer W  
Artesia, New Mexico 88211

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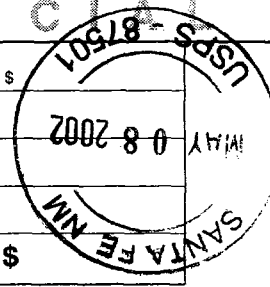
PRO/jr  
Enclosure

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

7001 1140 0002 5605 9526

OFFICIAL USE

PRO Postage \$  
Certified Fee  
Return Receipt Fee  
(Endorsement Required)  
Restricted Delivery Fee  
(Endorsement Required)  
Total Postage & Fees \$



Postmark  
Here

Sent To Mr. Marian C. Welch, Welch W C  
Street, Apt. No.;  
or PO Box No. P.O. Drawer W  
City, State, ZIP+ 4 Artesia, New Mexico 88211

PS Form 3800, January 2001

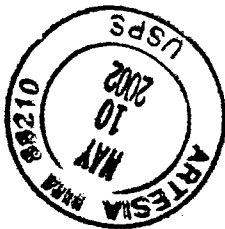
See Reverse for Instructions



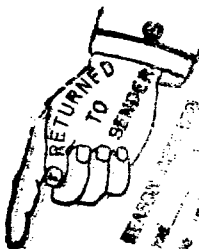
CERTIFIED MAIL



7001 1140 0002 5605 9526



MONTGOMERY & ANDREWS  
PROFESSIONAL ASSOCIATION  
POST OFFICE BOX 2307  
SANTA FE, NEW MEXICO 87504-2307



Mr. Marian C. Welch  
Welch W. C. Welch  
Post Office Box 2307  
Artesia, New Mexico 88211

Postage  
Address  
Registration  
No. 3004

5021

**District I**

1625 N. French Dr., Hobbs, NM 88240

**District II**

1301 W. Grand Avenue, Artesia, NM 88210

**District III**

1000 Rio Brazos Road, Aztec, NM 87410

**District IV**

1220 S. St. Francis Dr., Santa Fe, NM 87505

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

Form C-101

Revised March 17, 1999

Submit to appropriate District Office

State Lease - 6 Copies

Fee Lease - 5 Copies

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

|  |  |                  |
|--|--|------------------|
| Operator Name and Address<br>Duke Energy Field Services, Inc., 2300 North "A", Bldg. Seven, Midland, TX 79705-5421 |  | 36-185           |
| Property Code  |  | 30 - 015 - 32324 |
| Property Name<br>Duke AGI  |  | Well No.<br>#1   |

**7 Surface Location**

| Lot or Sublot | Section | Township | Range |  |      |       |      |      | County |
|---------------|---------|----------|-------|--|------|-------|------|------|--------|
| 0             | 7       | 18S      | 28E   |  | 1232 | South | 1927 | East | Eddy   |

**8 Proposed Bottom Hole Location If Different From Surface**

| UL or lot no.               | Section | Township | Range | Lot | Feet from the   | North/South line | Feet from the | East/West line | County |
|-----------------------------|---------|----------|-------|-----|-----------------|------------------|---------------|----------------|--------|
| Proposed Pool 1<br>Devonian |         |          |       |     | Proposed Pool 2 |                  |               |                |        |

|                     |                           |                        |                      |        |
|---------------------|---------------------------|------------------------|----------------------|--------|
| Well Type Code<br>N | Well Type Code<br>I       | Cable/Rotary<br>Rotary | Lease Type Code<br>P | 36-185 |
| Multiple<br>N       | Proposed Depth<br>11,500' | Formation<br>Devonian  | Contractor<br>TBD    | 6/1/02 |

**21 Proposed Casing and Cement Program**

| Hole Size          | Casing Size | Casing weight/foot | Setting Depth | Sacks of Cement | Estimated TOC |
|--------------------|-------------|--------------------|---------------|-----------------|---------------|
|                    | 20"         |                    | 45 ft         |                 | Surface       |
| 17 1/2"            | 13 3/8"     | 48 ppf             | 500 ft        | 545             | Surface       |
| 12 1/4"            | 9 5/8"      | 40.5 ppf           | 2,500 ft      | 855             | Surface       |
| 8 1/2"             | 7"          | 26 ppf             | 11,500 ft     | 250             | Surface       |
| Circ 7" To Surface |             |                    |               |                 |               |

22 Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

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

Signature:

Printed name: A. B. Glasgow

Title: Operations V.P. - Western Division

Date:

5/6/02

Phone:

925-552-1000

Approved by:

Title:

Approval Date:

Conditions of Approval:

Attached ☐

OIL CONSERVATION DIVISION

Approval Date:

Expiration Date:

NOTIFY OCD SPUD & TIME  
TO WITNESS CEMENTING OF  
ALL CASING STRINGS