

STATE OF NEW MEXICO
 ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
 OIL CONSERVATION DIVISION

IN THE MATTER OF THE HEARING CALLED BY)	
THE OIL CONSERVATION DIVISION FOR THE)	
PURPOSE OF CONSIDERING:)	
)	
APPLICATION OF GP II ENERGY, INC., FOR)	CASE NOS. 12,112
APPROVAL OF A WATERFLOOD PROJECT, EDDY)	
COUNTY, NEW MEXICO)	
)	
APPLICATION OF GP II ENERGY, INC., FOR)	and 12,113
STATUTORY UNITIZATION, EDDY COUNTY, NEW)	
MEXICO)	
<hr/>		(Consolidated)

OFFICIAL EXHIBIT FILE (4 of 4, Exhibit 11-16)

EXAMINER HEARING

BEFORE: DAVID R. CATANACH, Hearing Examiner

February 4th, 1999

Santa Fe, New Mexico

This matter came on for hearing before the New Mexico Oil Conservation Division, DAVID R. CATANACH, Hearing Examiner, on Thursday, February 4th, 1999, at the New Mexico Energy, Minerals and Natural Resources Department, Porter Hall, 2040 South Pacheco, Santa Fe, New Mexico, Steven T. Brenner, Certified Court Reporter No. 7 for the State of New Mexico.

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STEVEN T. BRENNER, CCR
 (505) 989-9317

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: X Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? Yes No
- II. OPERATOR: GP II Energy
ADDRESS: P. O. Box 50682 Midland, Tx. 79710
CONTACT PARTY: Robert Lee PHONE: (915)- 682-1251
- III. WELL DATA: Complete the data required on the reverse side of this form for each well processed for injection.
Additional sheets may be attached, if necessary.
- IV. Is this an expansion of an existing project: X Yes No
If yes, give the Division order number authorizing the project R-2977, R-2920, R-3217 & R-1110
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well within 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 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 source drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certifications: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: Robert Lee TITLE: Consulting Engineer
SIGNATURE: Robert Lee DATE: 12/8/98