

## NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON
GOVERNOR

Jennifer A. Salisbury
Cabinet Secretary

Lori Wrotenbery
Director
Oil Conservation Division

## **FINAL NOTICE**

**CERTIFIED MAIL** 

**DECEMBER 26, 2000** 

STRATA PRODUCTION CO P.O. BOX 1030 ROSWELL NM 88202-1030

## RE: INACTIVE NON-COMPLIANCE WELLS

The Oil Conservation Division (OCD) currently is addressing all inactive non-compliance wells as a top priority statewide project. A mass mail out was made on May 11, 2000 requesting information from each operator that had inactive wells. A second mail out was made on September 8, directing each operator as part of this project to provide additional information based on how they had responded to the May 11, 2000 letter.

By copy of this letter, the OCD director is requested to schedule a "Show Cause Hearing" to allow you the opportunity to appear and to show way a shut in order, order to plug and abandon all inactive non-compliance wells and/or to call for the forfeiture of your statewide bond is not issued. If your bond is called you can no longer operate in the State of New Mexico.

The "Show Cause Hearing" will be stayed if an aggressive plan being detailed and specific as to type of work and time frame to bring all non-compliance wells into compliance is received in this office within 30 days of receipt of this letter.

Attached is the latest (11/16/00) OCD list of inactive non-compliance wells for your company.

TIM W. GUM

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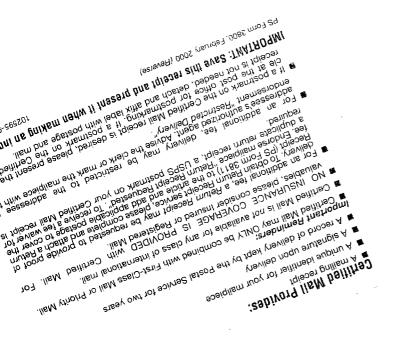
DISTRICT II SUPERVISOR
OIL CONSERVATION DIVISION

XC: LORI WROTENBERY ---- DIRECTOR OCD ATTORNEY ATTACHMENT

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	OCD 190
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## STRATAINACT111600.xls

API#	Туре	Last Production/ Injection	Well Name and Number	ULSTR	FNS	FEW
30-005-62340	G	07-1993	OBRIEN #001	C-25-07S-29E	600N	1900W
30-015-22748	G	05-1997	NORMAN FEDERAL #001	K-14-16S-30E	1980S	1980W
30-015-22937	G	05-1997	DUNCAN FEDERAL #001	M-11-16S-30E	860S	660W
30-015-24891	0	09-1996	LEE FEDERAL #006	K-25-20S-28E	1875S	1765W



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complitem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reviso that we can return the card to you.</li> <li>Attach this card to the back of the mailpor on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>Strata Production CO</li> <li>PO Box 1030</li> <li>Roswell NM 88202-1030</li> </ul> </li> </ul>	D. Is delivery address below:  C. Signature  Addressee  D. Is delivery address below:  No
•	3. Service Type  KCl Certified Mail □ Express Mail
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label)	
7000 0600 0026 1537 0366	
PS Form 3811, July 1999 C	omestic Return Receipt 102595-00-M-0952