

1985 Case 8550

APPLICATION FOR AUTHORIZATION TO INJECT

OIL CONSERVATION DIVISION
 Disposal Storage

- I. Purpose: Secondary Recovery Pressure Maintenance
Application qualifies for administrative approval? Yes No
- II. Operator: R. N. Ainsworth
Address: Box 7 Milnesand, N. M. 88125
Contact party: Joe D. Ramey Phone: 505 473-2120
- 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 _____.
- 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: Joe D. Ramey Title: Consultant

Signature: Joe D. Ramey Date: 3/11/85

* 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.

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.

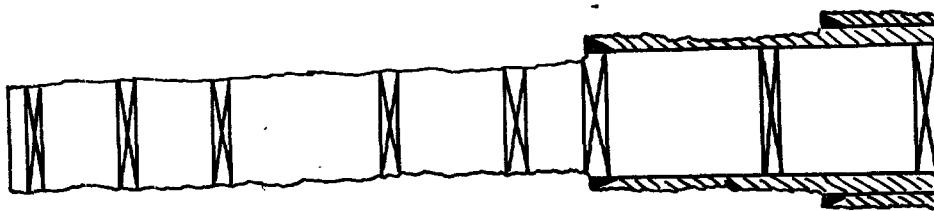
NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

SHEET 1

R. N. Ainsworth
OPERATORAinsworth SWD
LEASE1
WELL NO.2310' S & 660' W
SECTION30
12 South
TOWNSHIP
38 East
RANGE

Lea County, New Mexico

Schematictabular DataSurface CasingSize 13 3/8" " Cemented with 370 sxs.TOC Surface _____ feet determined by Circulated 70-sxsHole size 17"Intermediate CasingSize 8 5/8" " Cemented with 1600 sxs.TOC Surface _____ feet determined by Circulated 100-sxsHole size 11"Long string AFTER RE-ENTRYSize 5 1/2" " Cemented with Tie into 8 5/8 sxs.TOC Above 4500' feet determined by Temp-SurveyHole size 7 7/8"Total depth Approx. 12,230

Injection interval Perforate at approx.

30 sxs
11000-10900

feet

TD
12174

Tubing size 2 7/8" lined with PVC set in a
(material)

Baker Lok Tension Set 12,100' feet
(brand and model) packer at Approx. 12,100' feet

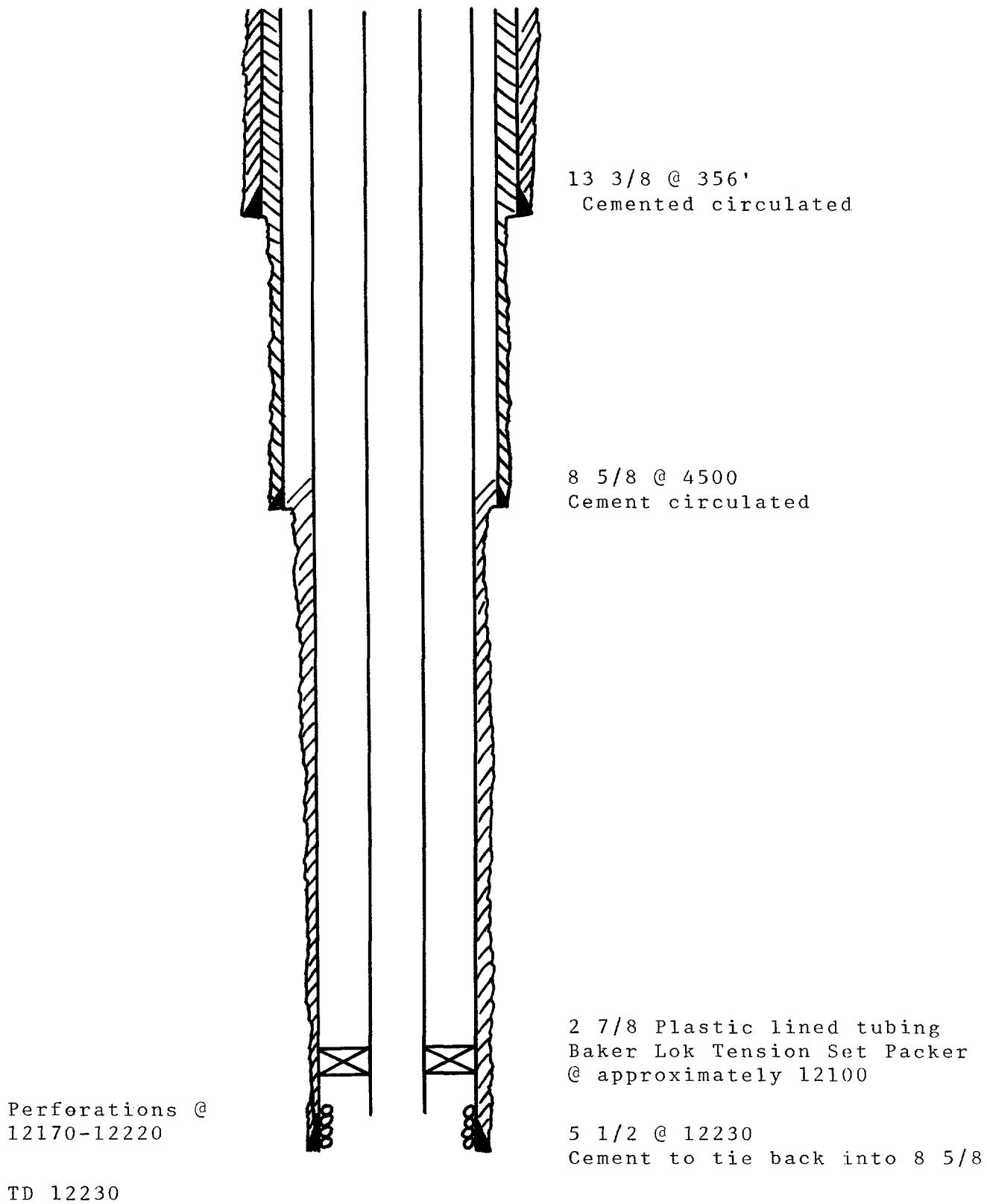
(or describe any other casing-tubing seal).

Other Data

1. Name of the injection formation Devoian
 2. Name of Field or Pool (if applicable) Gladiola
 3. Is this a new well drilled for injection? / Yes / No
 If no, for what purpose was the well originally drilled? _____
- Oil & Gas Test
4. 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)
 None. No production casing run in well.
 5. Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area.
 Gladiola Devonian 11,860' _____
 Gladola Wolfcamp 9580' _____

AINSWORTH SWD WELL NO. 1

SCHEMATIC AFTER RE-ENTRY AND COMPLETION



AINSWORTH SWD WELL NO. 1

DATA SHEET

The applicant will re-enter the P&A Halvey Energy Company State No. 1. All existing plugs will be drilled out and the well deepened from 12,174' to approximately 12,230'. A string of 5 1/2" casing will be run to total depth and cemented with a sufficient volume of cement to tie back into the 8 5/8" intermediate casing set at 4500'.

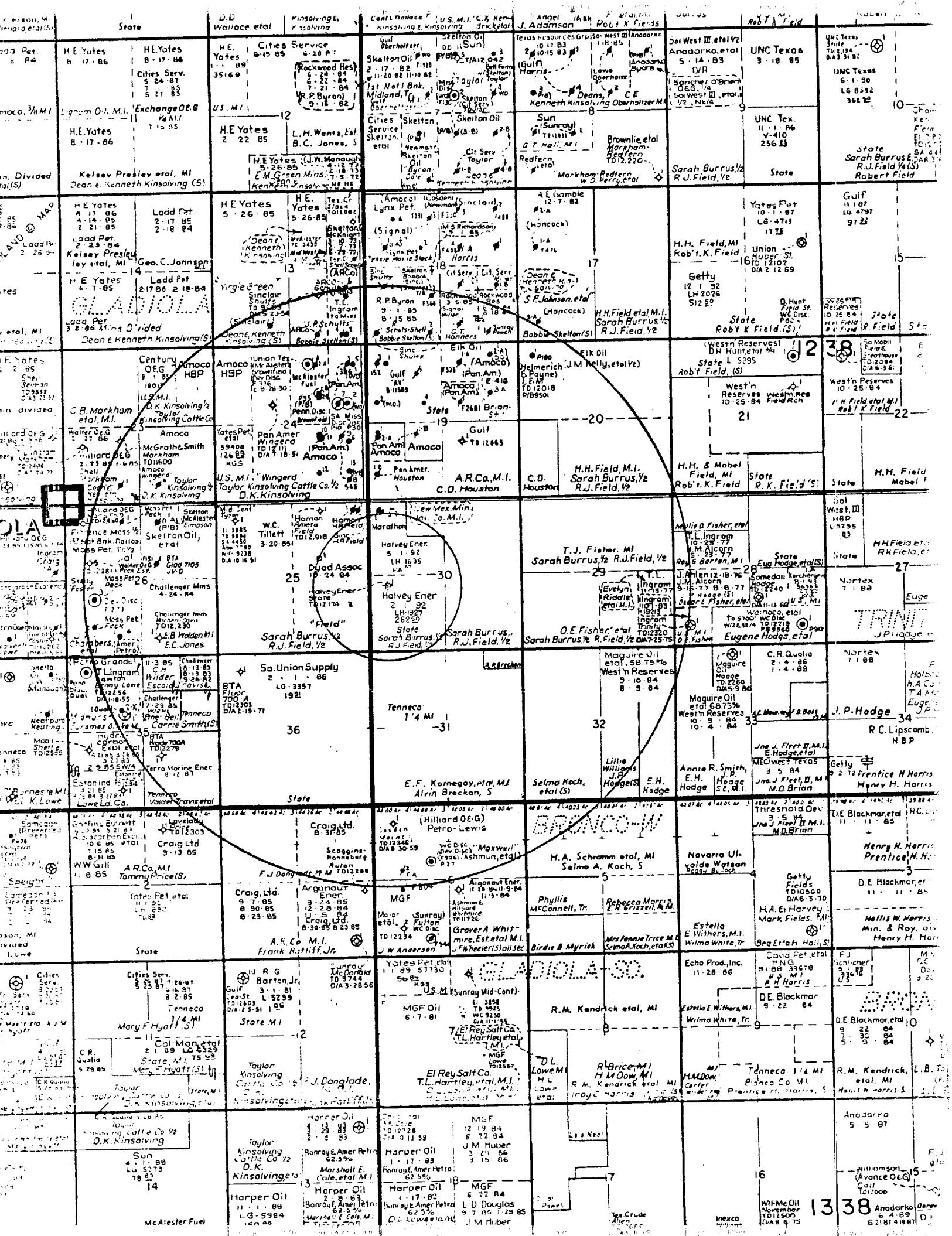
The 5 1/2" casing will be perforated at approximately 12,170-12,220 and treated with 500 gals. acid. A string of 2 7/8" plastic lined tubing will be run in the well with a Baker Lok Tension Set packer to be set at around 12,100'. Injection will be through tubing below a packer. The casing-tubing annular space will be filled with an inert fluid and will be equipped with a guage for monitoring for leaks.

It is anticipated that injection will average 10,000 bbls. per day with a maximum of 12,000 bbls. per day. Produced water from wells in the area will be trucked and possibly pipelined to the disposal facility and the system will be an open system. Produced waters from the Wolfcamp and Devonian will be accepted for disposal and compatibility results will be presented at the hearing. It is anticipated that the well will accept this volume of water on a vacuum but a limiting pressure of 2430 psi is requested.

The Devonian in the area can be described as a light tan, porous, vuggy dolomite and is around 240' thick. There is faulting noted in the Devonian, in the area, but it does not extend through the overlying Woodford Shale. The Woodford Shale is an effective seal against fluid migration upward from the Devonian.

The Ogallala is present in the area and contains the only available fresh water. Depth to fresh water is around 60' and the base of the Ogallala is at around 150'.

The surface owner and all offset operators within one-half mile of the well have been notified by certified mail.



STATE OF NEW MEXICO
GY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

SA. Indicate Type of Lease

State Fee

S. State Oil & Gas Lease No.

LH 1327

7. Unit Agreement Name

8. Farm or Lease Name

State

9. Well No.

1

10. Field and Pool, or Wildcat

Gladiola Devonian

TYPE OF WELL

OIL WELL GAS WELL DRY

OTHER _____

TYPE OF COMPLETION

EW WORK OVER DEEPEN PLUG BACK DIFF. RESVR.

OTHER _____

Name of Operator

alvey Energy Co.

Address of Operator

P. O. Box 3713, Midland, TX 79702

Location of Well

LETTER L LOCATED 2310 FEET FROM THE South LINE AND 660 FEET FROM

West LINE OF SEC. 30 TWP. 12-S RGE. 38-E NMPM

Date Spudded 16. Date T.D. Reached 17. Date Compl. (Ready to Prod.) 18. Elevations (DF, RKB, RT, GR, etc.) 19. Elev. Casinghead
-19-82 8-25-82 8-20-82 (PGA) 3865' GLTotal Depth 21. Plug Back T.D. 22. If Multiple Compl., How Many 23. Intervals , Rotary Tools Drilled By , Cable Tools
2,174' 12,174' → 0-12,174'

Producing Interval(s), of this completion — Top, Bottom, Name

25. Was Directional Survey Made

Yes

Type Electric and Other Logs Run

Borehole Compensated Sonic Log

27. Was Well Cored

No

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
3-3/8"	54.5	356'		370 SX Class "C"	None
8-5/8"	286.32	4,500'	11"	1300 SX HOWCO Light G 300 SX Class "C"	None

LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
	DEPTH INTERVAL
	AMOUNT AND KIND MATERIAL USED

PRODUCTION		Production Method (Flowing, gas lift, pumping — Size and type pump)		Well Status (Prod. or Shut-in)	
Hours Tested	Choke Size	Prod'n. For Test Period	OIL - Bbl.	Gas - MCF	Water - Bbl.
Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	OIL - Bbl.	Gas - MCF	Water - Bbl.

Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed By
--	-------------------

Count of Attachments	
----------------------	--

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED *R. L. Halvorsen* TITLE Owner DATE 9-21-82

R. L. Halvorsen

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

T. Anhy		T. Canyon	
T. Salt		T. Strawn	
D. Salt		T. Atoka	11,024
T. Yates		T. Miss	
T. 7 Rivers		T. Devonian	12,164
T. Queen		T. Silurian	
T. Grayburg		T. Montoya	
T. San Andres	4,484	T. Simpson	
T. Glorieta	5,928	T. McKee	
T. Paddock		T. Ellenburger	
T. Elinebry		T. Gr. Wash	
T. Tubb		T. Granite	
T. Drinkard		T. Delaware Sand	
T. Abo	7,890	T. Bone Springs	
T. Wolfcamp	9,099	T.	
T. Penn		T.	
T Cisco (Bough C)		T.	

Northwestern New Mexico

T. Ojo Alamo		T. Penn. "B"	
T. Kirtland-Fruitland		T. Penn. "C"	
T. Pictured Cliffs		T. Penn. "D"	
T. Cliff House		T. Leadville	
T. Menefee		T. Madison	
T. Point Lookout		T. Elbert	
T. Mancos		T. McCracken	
T. Gallup		T. Ignacio Qtzte	
Base Greenhorn		T. Granite	
T. Dakota		T.	
T. Morrison		T.	
T. Todilto		T.	
T. Entrada		T.	
T. Wingate		T.	
T. Chinle		T.	
T. Permian		T.	
T. Penn. "A"		T.	

OIL OR GAS SANDS OR ZONES

No. 1, from.....	to.....	No. 4, from.....	to.....
No. 2, from.....	to.....	No. 5, from.....	to.....
No. 3, from.....	to.....	No. 6, from.....	to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....	to.....	feet.....
No. 2, from.....	to.....	feet.....
No. 3, from.....	to.....	feet.....
No. 4, from.....	to.....	feet.....

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
Surface	2,255	2,255	Surface sands & redbeds	11,415	12,065	650	Mississippian Limestone & Chert
2,255	2,300	45	Anhydrite				
2,300	3,070	770	Salt & Anhydrite	12,065	12,165	100	Woodford Shale
3,070	3,210	140	Yates Sand	12,165	12,186	21	Devonian Dolomite
3,210	4,485	1,275	Alt. sand, shale, anhyd. & dol.	(TD)			
4,405	5,930	1,445	San Andres Dolomite				
5,930	7,210	1,270	Clearfork Sands & Dolomite				
7,210	7,890	680	Tubb sands & Dolomite				
7,890	9,100	210	Abo Shale & Dolomite				
9,100	9,700	600	Wolfcamp Limestone & Shale				
9,700	11,025	1,325	Pennsylvanian Limestone				
11,025	11,415	390	Atoka Sands & Shale				

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OIL CONSERVATION DIVISION

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Form C-103
Revised 10-

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/>
Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LH 1327

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DECFLIP OR PLUG BACK TO A DIFFERENT RESERVOIR,
SEE "APPLICATION FOR PERMIT TO" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL GAS WELL OTHER

Name of Operator
Halvey Energy Co.

Address of Operator
P. O. Box 3713, Midland, TX 79702

Location of Well

UNIT LETTER L, 2310 FEET FROM THE South LINE AND 660 FEET FROM

THE West LINE, SECTION 30 TOWNSHIP 12-S RANGE 38-E MMPPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3865' GL

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

16. Perform Remedial Work

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASTING

TEMPORARILY ABANDON

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

ULL OR ALTER CASING

CHANGE PLANS

CASING TEST AND CEMENT JOBS

OTHER

OTHER

Drillstem Tests

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

8-21-82 DST #1 11,716-776' (Miss.) Tool open 45 min., no surface indication of fluid entry. Rec. 1000' WB, 90' SG&WCDM plus 180' FW, 5000 ppm Cl. Sample chamber 150#, rec. 50cc water, 5000 ppm Cl. Pressures: IH 6086 psi, 15 min. IF 551-519 30 min. ISI 814, 30 min. FF 486-486, 60 min. FSI 747, FH 595

8-26-82 DST #2 12,040-174' (Dev.) Tool open 45 min., rec. 1000' WB plus 5700' sulfur water. No shows. Pressure: IH 6020, 15 min. IF 517-1355, 60 min. ISI 4408, 30 min. FF 1355-2614, 120 min. FSI 4408, FH 6020

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

R. L. Halvorsen Owner

9-24-82

NED

DATE

APPROVED BY OIL CONSERVATION TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

DATE OC