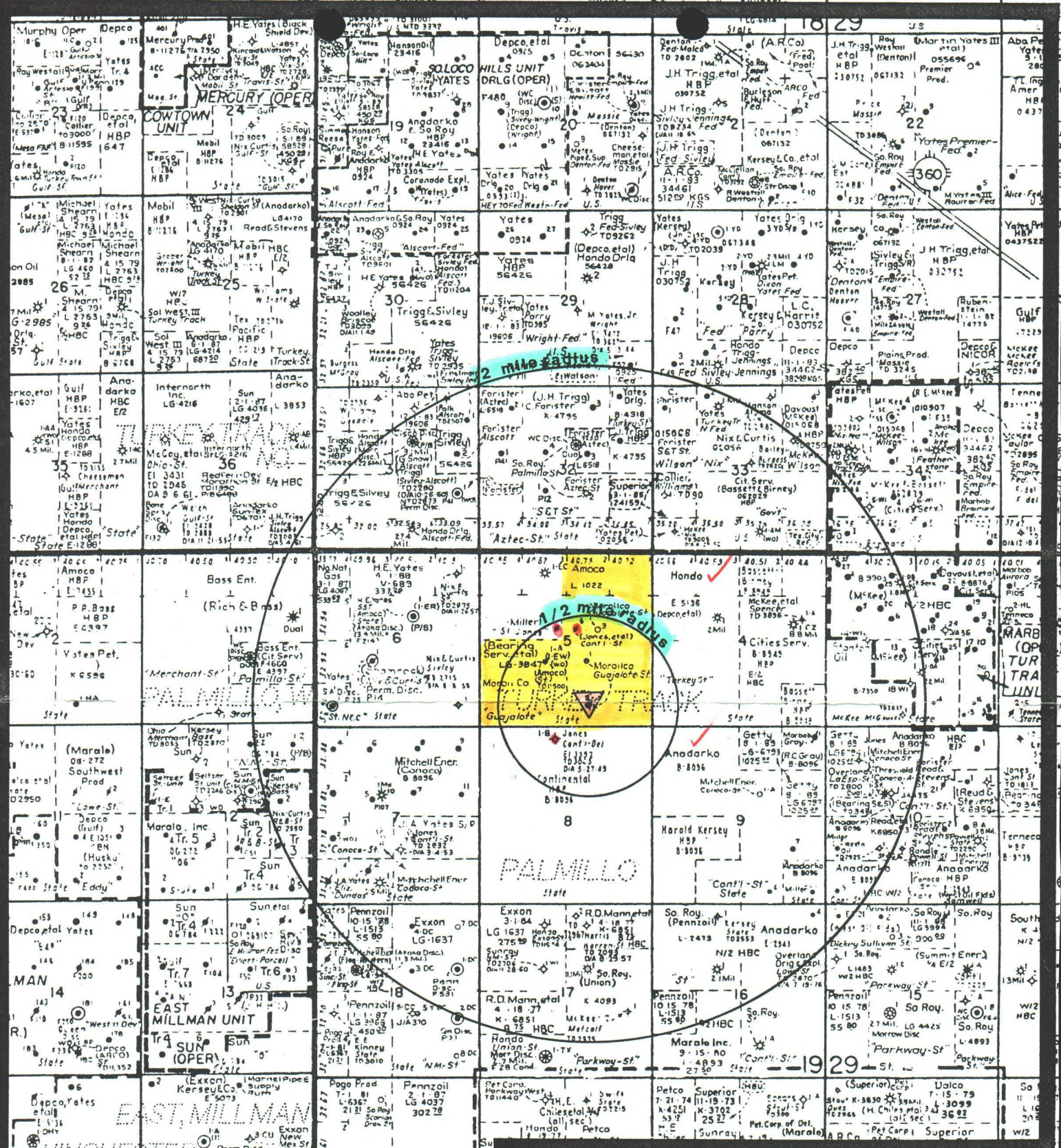




**Guajalote Turkey Track Field
Well and Lease Ownership Map**
Scale: 1 inch - 4,000 Feet

 Moroico Guajalote State Lease

 Proposed Moroico Water Disposal Well

MOROICO 8614

Exhibit 2

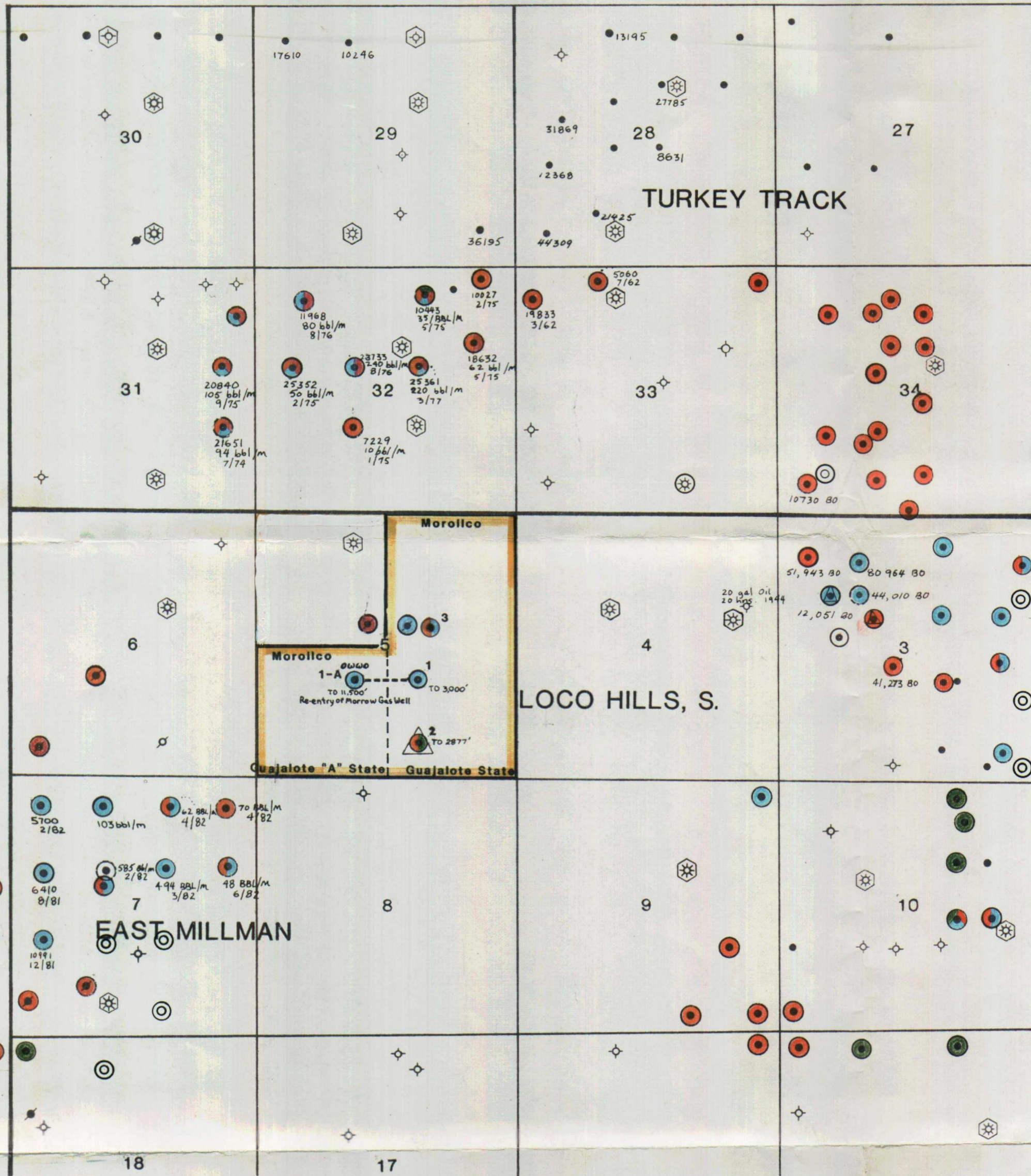
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Guajalote Prospect

CUMULATIVE PRODUCTION & PRODUCING ZONE MAP

Showing Cumulative Production to 1 - 1 - 83
Month Production during August, 1983 and
Date Wells Began producing.

Stephen T. Mitchell

George L. Scott

March, 1985

EXPLANATION

- PRE SAN ANDRES
- SEVEN RIVERS
- QUEEN

- PENROSE
- GRAYBURG
- SAN ANDRES

Proposed Wtr. disposal well ----- Cross Section

Exhibit 3

BEFORE EXAMINER QUINTANA
OIL CONSERVATION DIVISION
Morolico EXHIBIT NO. 3
CASE NO. 8617

PHONE (505) 748-2194
PHONE (505) 748-2325



DRAWER I
ARTESIA, NEW MEXICO 88210

RECEIVED
MAY 17 1985

ARCO OIL AND GAS CO.
NORTH & WEST LAND DEPT.

May 14, 1985

Hondo Oil & Gas
P.O. Box 1610
Midland, TX 79702

Re: Application for Permit to Inject
Guajalote State #2
NW SE Section 5, T19S, R29E
Eddy County, New Mexico

Gentlemen,

Attached is a copy of MorOilCo, Inc., application to convert our Guajalote State #2 well to a produced water disposal system. The hearing date for this application is set for June 5, 1985. If you have any questions regarding our application, please contact me at (505) 748-2194. If you have no objection to the proposed system, please sign and return one copy of this letter in the stamped, self-addressed envelope which is enclosed.

Sincerely,

MOROILCO, INC.

A handwritten signature in cursive script that reads "Frank S. Morgan".

Frank S. Morgan
Vice President

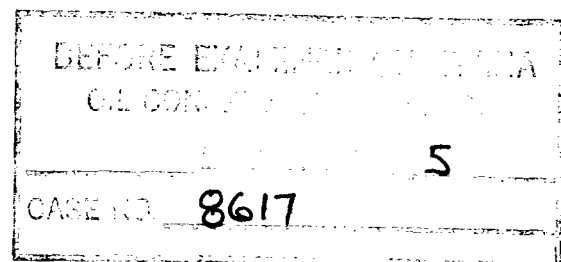
FSM/rln

Enclosure

DATE: 5-20-85

BY: J. R. Hastings

TITLE: District Engineer



PS Form 3811, July 1983 447-846

SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1. ☐ Show to whom, date and address of delivery.

2. ☐ Restricted Delivery.

3. Article Addressed to:
Hondo Duff Lks
Box 1610
Midland, TX 79702

4. Type of Service: Article Number

☐ Registered	☐ Insured
☒ Certified	☐ COD
☐ Express Mail	

010 003 149

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
X

6. Signature - Agent
X *[Signature]*

7. Date of Delivery
5-17-85

8. Addressee's Address *(ONLY if requested and for full)*



DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845



SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

*Husky Oil Co.
606 S. Willow Dr.
Englewood, Colo. 80111*

4. Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P010003151

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature — Addressee

X

Anthony Smith

6. Signature — Agent

X

7. Date of Delivery

5/17

8. Addressee's Address (*ONLY if requested and fee paid*)

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845

SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

~~1. Show to whom, date and address of delivery.~~

2. ☐ Restricted Delivery.

3. Article Addressed to:

Yates Pet. Corp.
207 S. 4th
Artesia, N.M. 88210

4. Type of Service:

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

PD10 003152

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature -- Addressee

X

6. Signature -- Agent

X

7. Date of Delivery

5/16/85

8. Addressee's Address (*ONLY if requested and fee paid*)

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1, 2, 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery.</u> For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.	
1. ☐ Show to whom, date and address of delivery.	
2. ☐ Restricted Delivery.	
3. Article Addressed to: <i>Conoco Inc.</i> <i>Box 1959</i> <i>Midland, Tx. 79702</i>	
4. Type of Service: ☐ Registered ☒ Certified ☐ Express Mail	Article Number <i>010 003148</i>
Always obtain signature of addressee <u>or</u> agent and DATE DELIVERED.	
5. Signature — Addressee <i>X</i>	
6. Signature — Agent <i>X</i>	
7. Date of Delivery <i>MAY 20 1985</i>	
8. Addressee's Address (<i>ONLY if requested and fee paid</i>)	



P 010 003 151

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-446-014

Form 3800, Feb. 1982

Sent to	Husky Oil
Street and No.	6060 S. Willow Dr
P.O., State and ZIP Code	Englewood CO 80111
Postage	\$ 141
Certified Fee	45
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	70
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 286
Postmark & Date	

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-446-014
3 Form 3800, Feb. 1982

Sent to	Depco	
Street and No.	110 16th St. Suite 100	
P.O. State and ZIP Code	Denver CO 80202	
Postage	\$	141
Certified Fee		75
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		70
Return receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees		286
Postmark of		

P 010 003 149

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

S Form 3800, Feb. 1982
★ U.S.G.P.O. 1984-446-014

Sent to	Honolulu Oil & Gas	
Street and No.	Box 1610	
P.O., State and ZIP Code	Midland TX 79702	
Postage	\$	141
Certified Fee		75
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		70
Return receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees		286
Postmark or Date		

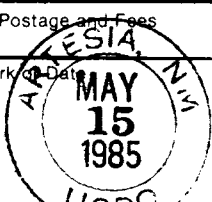
RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

Sent to	CANOCO INC	
Street and No.	BX 1959	
P.O., State and ZIP Code	Midland Tx 79702	
Postage	\$	141
Certified Fee		75
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		70
Return receipt showing to whom. Date, and Address of Delivery		
TOTAL Postage and Fees	\$	286
Postmark or Date		

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-446-014
Form 3800, Feb. 1982

Sent to	Yates Pet camp	
Street and No.	207 S 4th	
P.O., State and ZIP Code	Dixieville NH 03821	
Postage	\$	141
Certified Fee		75
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		70
Return receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees		286
Postmark or Date	MAY 15 1985	

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Form 3800, Feb. 1982
★ U.S.G.P.O. 1984-446-014

Sent to <i>Madawke Prod. Co.</i>	
Street and No. <i>Box 2497</i>	
P.O., State and ZIP Code <i>Midland Tex 79702</i>	
Postage	\$ <i>141</i>
Certified Fee	<i>75</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	<i>70</i>
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	<i>286</i>
Postmark of Date 	

PHONE (505) 748-2194
PHONE (505) 748-2325

RECEIVED
5/22/85



DRAWER 1
ARTESIA, NEW MEXICO 88210

May 14, 1985

Depco
110 Sixteenth Street
Suite 100
Denver, CO 80202

Re: Application for Permit to Inject
Guajalote State #2
NW SE Section 5, T19S, R29E
Eddy County, New Mexico

Gentlemen,

Attached is a copy of MorOilCo, Inc., application to convert our Guajalote State #2 well to a produced water disposal system. The hearing date for this application is set for June 5, 1985. If you have any questions regarding our application, please contact me at (505) 748-2194. If you have no objection to the proposed system, please sign and return one copy of this letter in the stamped, self-addressed envelope which is enclosed.

Sincerely,

MOROILCO, INC.

Frank S. Morgan
Vice President

FSM/rlm

Enclosure

DATE: 5/17/85

BY: Al Flower TITLE: Chief Engr.

PHONE (505) 748-2194
PHONE (505) 748-2325



DRAWER I
ARTESIA, NEW MEXICO 88210

May 14, 1985

Anadarko Production Company
P.O. Box 2497
Midland, TX 79702

Re: Application for Permit to Inject
Guajalote State #2
NW SE Section 5, T19S, R29E
Eddy County, New Mexico

Gentlemen,

Attached is a copy of MorOilCo, Inc., application to convert our Guajalote State #2 well to a produced water disposal system. The hearing date for this application is set for June 5, 1985. If you have any questions regarding our application, please contact me at (505) 748-2194. If you have no objection to the proposed system, please sign and return one copy of this letter in the stamped, self-addressed envelope which is enclosed.

Sincerely,

MOROILCO, INC.

A handwritten signature in cursive script that reads "Frank S. Morgan".

Frank S. Morgan
Vice President

FSM/rlm

Enclosure

DATE: May 20, 1985

BY: W.D. Sullivan

TITLE: Divin Res ENGR.

SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

*Anadarko Prod. Co.
Box 2497
Midland, Tx. 79702*

4. Type of Service:

- | | |
|---|----------------------------------|
| ☐ Registered | ☐ Insured |
| ☒ Certified | ☐ COD |
| ☐ Express Mail | |

Article Number

010 003147

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X

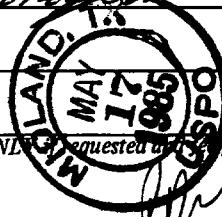
6. Signature - Agent

X

7. Date of Delivery

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

DOMESTIC RETURN RECEIPT



PS Form 3811, July 1983 447-845

SENDER: Complete items 1, 2, 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery.</u> For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.	
1. ☐ Show to whom, date and address of delivery.	
2. ☐ Restricted Delivery.	
3. Article Addressed to: <i>Depco 110 16 1/2 St., Ste. 100 Denver, Colo. 80202</i>	
4. Type of Service: ☐ Registered ☒ Certified ☐ Express Mail	Article Number <i>010 003150</i>
Always obtain signature of addressee or agent and DATE DELIVERED	
5. Signature - Addressee <i>[Signature]</i> X	
6. Signature - Agent X	
7. Date of Delivery <i>5/17/85</i>	
8. Addressee's Address (ONLY if requested and fee paid)	

DOMESTIC RETURN RECEIPT

