

Exhibits 1 and 2

ANADARKO PETROLEUM CORPORATION  
EXXON SWD NO. 3 HEARING 2/6/92

EXAMINER CATANACH  
CONSERVATION DIVISION

Anadarko EXHIBIT NO. 1  
10439

I. Why we need the disposal well.

- A. Water from Exxon No. 1
  - 1. Options
    - a. Trucking
    - b. Laguna Gatuna
    - c. Disposal well

II. Permits

- A. BLM has been approved (OCD has copy)

- B. NMOC Permit

- 1. Offset Mineral Owners contacted w/no objections
- 2. Surface Owner contacted w/no objections
- 3. Application made based on
  - a. NMOC Rule 701-D-1,2,3
  - b. Capitan Reefs poor water quality

III. Sources of Information

- A. Personal Experience

- 1. Severe lost circulation
- 2. Water saline & sour (H<sub>2</sub>S)

- B. City of Carlsbad

- 1. Max Cordova - Environmental Engineer
- 2. Jim Harrison - Water Dept.

- C. State Engineers Office Roswell

- D. State Engineers - Technical Report #38

(Capitan Aquifer Observation - Well Network Carlsbad to Jal New Mexico by W. L. Hiss w/cooperation of USGS)

IV. Capitan Reef

- A. Put up slide #1

- 1. Explain reef building on edge of Delaware Basin
  - a. Point out Delaware Basin, Reef, State Lines, City of Carlsbad, Jal, Exxon #3, WSW #1
- 2. Reef Today
  - a. Outcrops in Mts west of Carlsbad, Pecos River, Dip of Reef east to south
- 3. Water west of Pecos fresh w/source greatly dependant on local weather
- 4. East of Pecos reef appears to be fractured and the saline Pecos River is source of part of eastern reef water
- 5. Current use of water west of Pecos is fresh water for City of Carlsbad. I visited w/both Mr. Cordova & Mr. Harrison - they said as does the Tech Report #38 that the Capitan Reef west of Pecos is not supplied by same source.

6. Water withdraw east of the Pecos is for refining & waterflooding in Eddy, Lea, Winkler & Ward Counties.

B. Put up slide #2

1. Explain Tech Report #38 & observation wells, point to Exxon #3, WSW #1, Little Eddy Unit I, rest of the 16 wells monitored.

C. Slide #3 Explain

1. West to East
2. Increase subsea depth
3. Flow of ground water in reef east
4. Decrease in water level of eastern reef
  - a. ~~eg~~ FL 6/67 to 3/76 dropped 500' to 600' during study
5. Compare Water Analysis

**I . SECONDARY OR OTHER ENHANCED RECOVERY,  
PRESSURE MAINTENANCE, SALT WATER DISPOSAL,  
AND UNDERGROUND STORAGE**

Order No. R-6702, effective July 1, 1981, amended, adopted and renumbered Rules 701 through 708.

**RULE 701. INJECTION OF FLUIDS INTO RESERVOIRS**  
 (As Amended by Order No. R-930, December 28, 1956; Order No. R-1525, November 9, 1959; Order No. R-1644, May 1, 1960; Order No. R-2490, May 28, 1963; Order No. R-2764, September 8, 1964; Order No. R-2761, January 1, 1965; Order No. R-3092, July 18, 1966; Order No. R-3375, March 1, 1968; Order No. R-3933, June 1, 1970; Order No. R-4348, September 1, 1972; Order No. R-4381, September 1, 1972; Order No. R-6702, July 1, 1981; and Order No. R-8390, February 1, 1987.)  
 (See Section IV, Secondary Recovery, for Complete Order No. R-1525.)

**A. PERMIT FOR INJECTION REQUIRED** (As Amended by Order No. R-6702, July 1, 1981.)

The injection of gas, liquefied petroleum gas, air, water, or any other medium into any reservoir for the purpose of maintaining reservoir pressure or for the purpose of secondary or other enhanced recovery or for storage or the injection of water into any formation for the purpose of water disposal shall be permitted only by order of the Division after notice and hearing, unless otherwise provided herein.

**B. METHOD OF MAKING APPLICATION** (As Amended by Order No. R-2490, May 28, 1963; Order No. R-3375, March 1, 1968; and Order No. R-6702, July 1, 1981.)

(1) Application for authority for the injection of gas, liquefied petroleum gas, air, water or any other medium into any formation for any reason, including but not necessarily limited to the establishment of or the expansion of water flood projects, enhanced recovery projects, pressure maintenance projects, and salt water disposal, shall be by submittal of Division Form C-108 complete with all attachments.

(2) The applicant shall furnish, by certified or registered mail, a copy of the application to the owner of the surface of the land on which each injection or disposal well is to be located and to each leasehold operator within one-half mile of the well.

**(3) Administrative Approval**

If the application is for administrative approval rather than for a hearing, it must also be accompanied by a copy of a legal publication published by the applicant in a newspaper of general circulation in the county in which the proposed injection well is located. (The details required in such legal notice are listed on Side 2 of Form C-108.)

No application for administrative approval may be approved until 15 days following receipt by the Division of Form C-108 complete with all attachments including evidence of mailing as required under paragraph 2 above and proof of publication as required by paragraph 3 above.

If no objection is received within said 15-day period, and a hearing is not otherwise required, the application may be approved administratively.

**C. HEARINGS**

If a written objection to any application for administrative approval of an injection well is filed within 15 days after receipt of a complete application, or if a hearing is required by these rules or deemed advisable by the Division Director, the application shall be set for hearing and notice thereof given by the Division.

**D. SALT WATER DISPOSAL WELLS** (As Amended by Order No. R-2490, May 28, 1963; Order No. R-2761, January 1, 1965; Order No. R-3375, March 1, 1968; Order No. R-6702, July 1, 1981; and Order No. R-8390, February 1, 1987.)

1. The Division Director shall have authority to grant an exception to the requirements of Rule 701-A for water disposal wells only, without hearing, when the waters to be disposed of are mineralized to such a degree as to be unfit for domestic, stock, irrigation, or other general use, and when said waters are to be disposed of into a formation older than Triassic (Lea County only) and provided no objections are received pursuant to Rule 701-B 3.

**(I) SECONDARY OR OTHER ENHANCED RECOVERY,  
PRESSURE MAINTENANCE, SALT WATER DIS-  
POSAL, AND UNDERGROUND STORAGE - Cont'd.)**

2. Disposal will not be permitted into zones containing waters having total dissolved solids concentrations of 10,000 mg/l or less except after notice and hearing, provided however, that the Division may establish exempted aquifers for such zones wherein such injection may be approved administratively.

3. Notwithstanding the provisions of paragraph 2 above, the Division Director may authorize disposal into such zones if the waters to be disposed of are of higher quality than the native water in the disposal zone.

**E. PRESSURE MAINTENANCE PROJECTS**

1. Pressure maintenance projects are defined as those projects in which fluids are injected into the producing horizon in an effort to build up and/or maintain the reservoir pressure in an area which has not reached the advanced or "stripper" state of depletion.

2. All applications for establishment of pressure maintenance projects shall be set for hearing.

The project area and the allowable formula for any pressure maintenance project shall be fixed by the Division on an individual basis after notice and hearing.

3. Pressure maintenance projects may be expanded and additional wells placed on injection only upon authority from the Division after notice and hearing or by administrative approval.

The Division Director shall have authority to grant an exception to the hearing requirements of Rule 701-A for the conversion to injection of additional wells within a project area provided that any such well is necessary to develop or maintain efficient pressure maintenance within such project and provided that no objections are received pursuant to Rule 701-B(3).

**F. WATER FLOOD PROJECTS** (As Amended by Order No. R-2764, September 8, 1964; Order No. R-3092, July 18, 1966; Order No. R-3375, March 1, 1968; Order No. R-3933, June 1, 1970; Order No. R-4348, September 1, 1972; Order No. R-4381, September 1, 1972; and Order No. R-6702, July 1, 1981.)

1. Water flood projects are defined as those projects in which water is injected into a producing horizon in sufficient quantities and under sufficient pressure to stimulate the production of oil from other wells in the area, and shall be limited to those areas in which the wells have reached an advanced state of depletion and are regarded as what is commonly referred to as "stripper" wells.

2. All applications for establishment of water flood projects shall be set for hearing.

The project area of a water flood project shall comprise the proration units owned or operated by a given operator upon which injection wells are located plus all proration units owned or operated by the same operator which directly or diagonally offset the injection tracts and have producing wells completed on them in the same formation; provided however, that additional proration units not directly nor diagonally offsetting an injection tract may be included in the project area if, after notice and hearing, it has been established that such additional units have wells completed thereon which have experienced a substantial response to water injection.

3. The allowable assigned to wells in a water flood project area shall be equal to the ability of the wells to produce and shall not be subject to the depth bracket allowable for the pool nor to the market demand percentage factor.

Nothing herein contained shall be construed as prohibiting the assignment of special allowables to wells in buffer zones after notice and hearing. Special allowables may also be assigned in

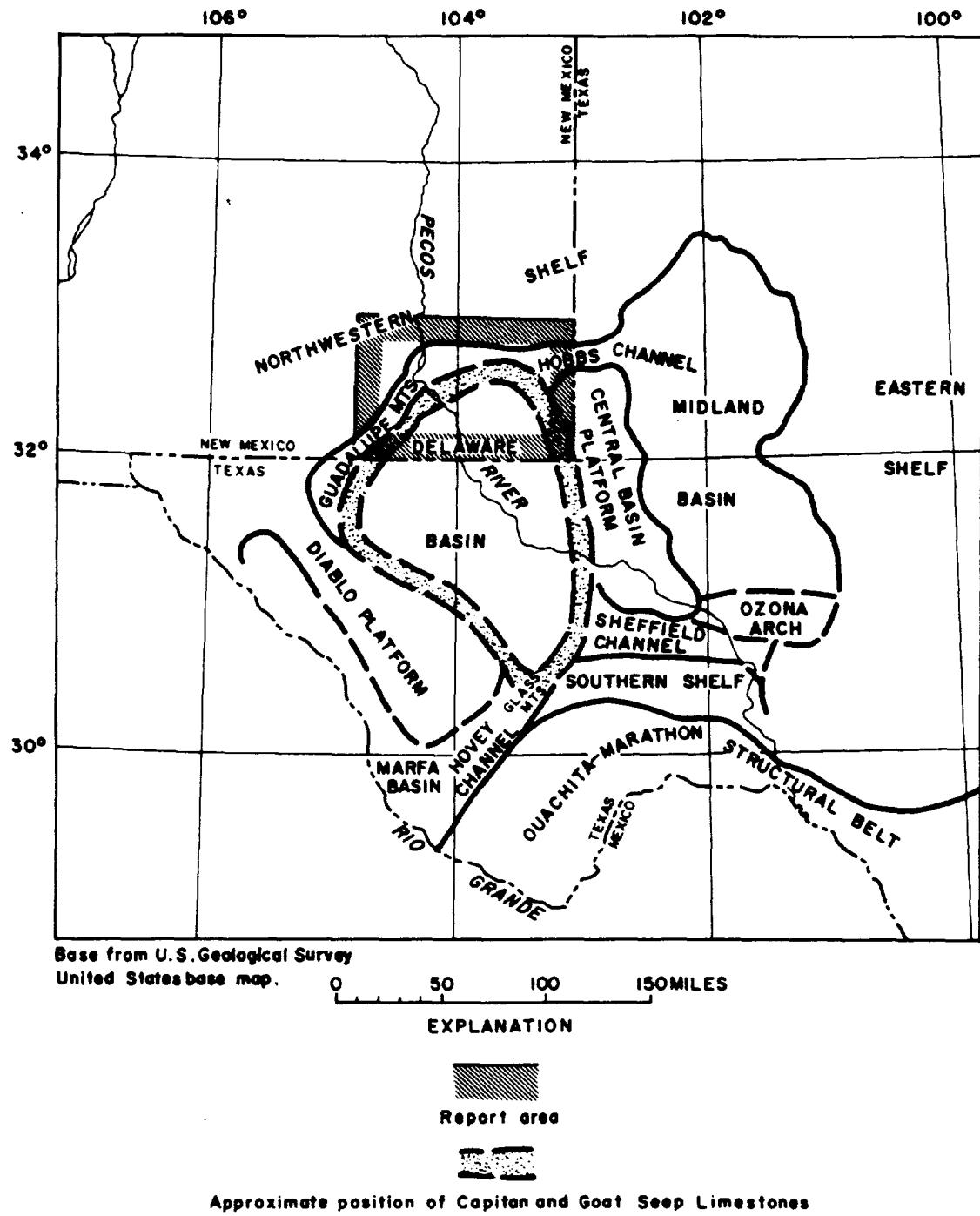
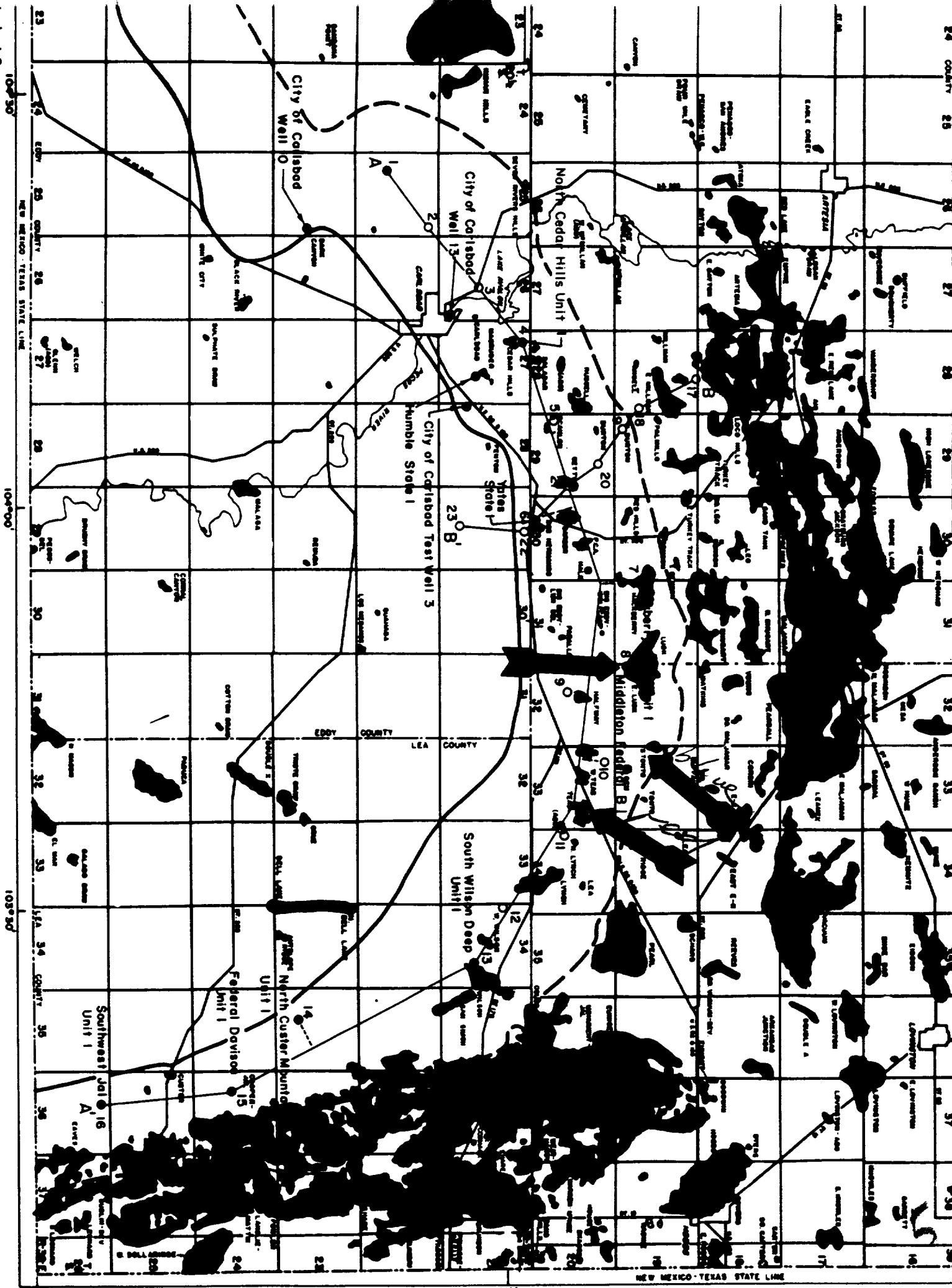


Figure 1.--Tectonic elements in the Permian basin of west Texas and southeastern New Mexico (modified after Oriel, Meyers, and Crosby, 1967).



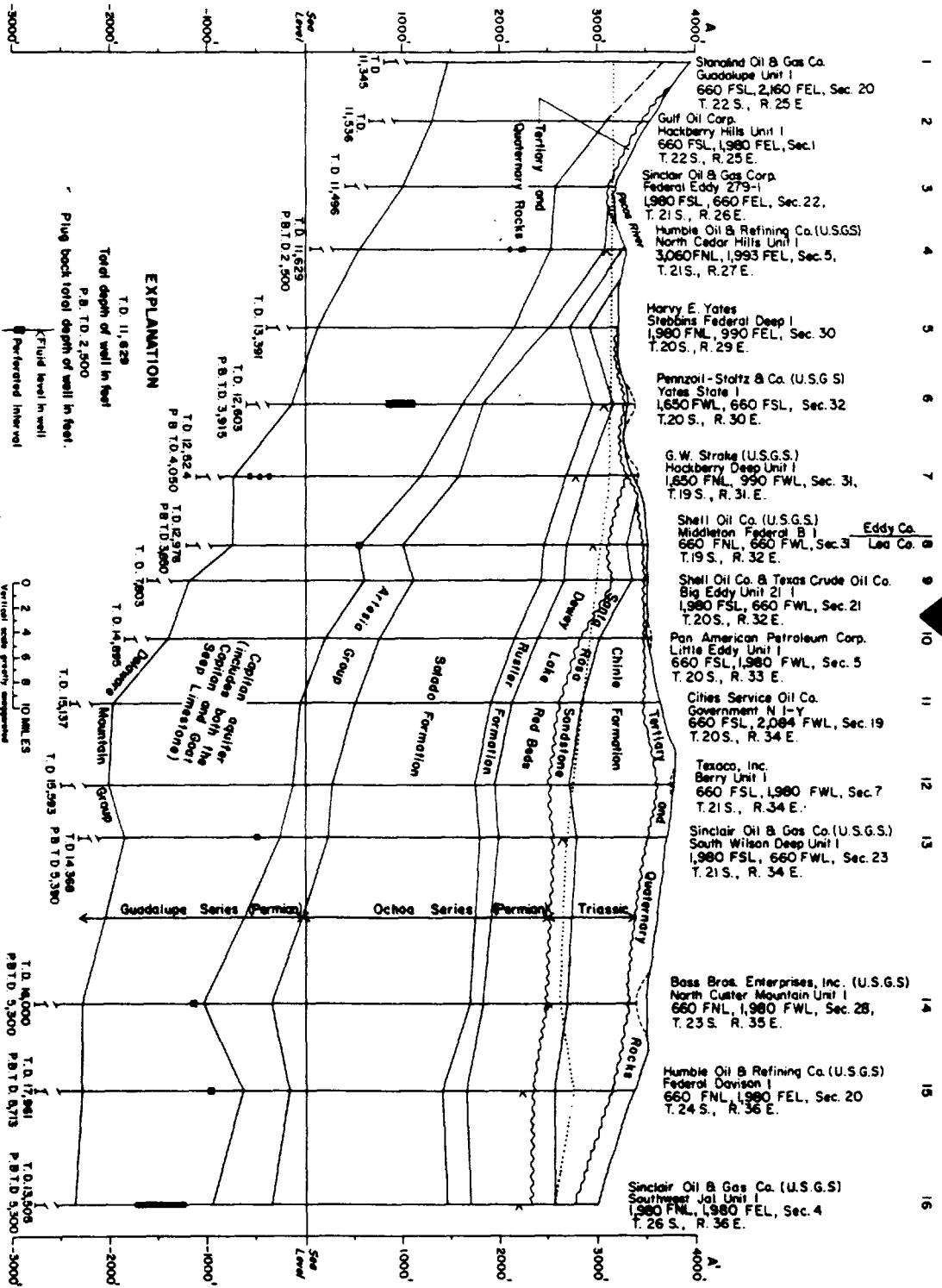


Figure 3.--Longitudinal stratigraphic section A-A' showing the position of the Capitan aquifer, Eddy and Lea Counties, New Mexico.

Table 2.—Chemical quality of water in Capitan aquifer observation wells—Concluded

Location number	Well name	Aquifer	Producing interval or sampling depth (feet)	Date	Silica (SiO <sub>2</sub> )	Calcium (Ca)	Magnesium (Mg)	Bicarbonate (HCO <sub>3</sub> )	Sulfate (SO <sub>4</sub> )	Chloride (Cl)	Fluoride (F)	Total dissolved solids	Specific conductance (micromhos at 25°C)	pH		
10, 30, 32, 34	Yates State 1—Concluded	Capitan	1,000 <sup>2</sup> -4,610/1 1,500 <sup>2</sup> -4,610/1	12-29-71	1,452	600	13,808	595	4,410	22,016	---	43,712	6,100	---	50,000 7.1	
32, 34	do.	do.	1,500 <sup>2</sup> -4,610/1 2,000 <sup>2</sup> -4,610/1	12-29-71	1,452	552	14,367	576	4,480	22,726	---	43,730	5,900	---	52,083 7.1	
32, 34	do.	do.	2,000 <sup>2</sup> -4,610/1	12-29-71	552	14,385	571	4,480	21,716	---	43,658	5,900	---	50,000 7.1		
19, 31, 31, 32	Hackberry Deep Unit 1	do.	2,500 <sup>2</sup> -4,610/1 2,111 <sup>3</sup> -4,610/1	12-29-71	946	482	10,348	134	3,080	16,689	---	32,058	4,350	---	43,680 6.9	
31, 32	do.	do.	3,005 <sup>4</sup> -4,610/1	12-15-66	---	---	---	---	87,500	---	---	---	1,109	---	175,000 ---	
31, 32	do.	do.	3,746 <sup>5</sup> -4,610/1	12-15-66	---	---	---	---	87,000	---	---	---	1,109	---	174,000 ---	
31, 32	do.	do.	3,812 <sup>6</sup> -4,610/1	12-15-66	---	---	---	---	87,500	---	---	---	1,109	---	174,000 ---	
31, 32	do.	do.	3,938 <sup>7</sup> -4,610/1	12-15-66	---	---	---	---	102,000	---	---	---	1,130	---	194,000 ---	
31, 32	do.	do.	750 <sup>2</sup> -4,610/1	10-21-71	1,892	1,767	69,691	5	5,320	11,2,110	---	191,024	12,000	---	1,115 <sup>12</sup> / 200,000 5.0	
31, 32	do.	do.	1,520 <sup>2</sup> -4,610/1	10-21-71	1,848	1,842	68,569	0	5,110	11,0,790	---	188,307	12,200	---	1,114 196,078 4.9	
31, 32	do.	do.	2,020 <sup>2</sup> -4,610/1	10-21-71	1,804	1,699	69,879	2	5,250	11,2,210	---	190,993	11,500	---	1,115 200,000 5.0	
31, 32	do.	do.	2,770 <sup>2</sup> -4,610/1	10-21-71	1,716	1,825	69,756	10	5,250	11,2,210	---	190,902	11,800	---	1,115 200,000 5.25	
31, 32	do.	do.	3,220 <sup>2</sup> -4,610/1	10-21-71	1,760	1,701	69,874	5	5,110	11,2,210	---	190,791	11,400	---	1,116 200,000 5.1	
31, 32	do.	do.	3,770 <sup>2</sup> -4,610/1	10-21-71	1,980	1,863	66,796	649	4,970	107,949	---	184,227	12,700	---	1,112 196,078 7.1	
19, 32, 34, 31, 32	Middleton Federal B-1	Seven Rivers- Capitan	2,923-2,957	9-26-61	9.2	1,012	537	8,510	357	3,420	13,210	---	27,200	4,088	---	1,024 ---
31, 31, 30	do.	do.	2,923-2,957	10-26-66	---	1,200	446	7,810	460	0	3,650 <sup>9</sup> /	12,500 <sup>9</sup> /	---	25,800 4,830 4,420 1,017 4.8		
31, 31, 30	do.	do.	2,923-2,957	10-26-66	---	1,095	953	7,950	389	465	17,900 <sup>9</sup> /	28,740	---	1,020 1,034 1,034 1,034 7.5		
21, 34, 23, 31, 30	South Wilson Deep Unit 1	Capitan	4,169-4,187	10-25-66	---	---	---	---	5,920	---	---	---	1,012	---	---	
23, 31, 30	do.	do.	4,169-4,187	10-25-66	---	1,060	302	3,190	480	0	2,820	5,250	---	1,173 215,000 ---		
23, 35, 28, 17, 0	North Custer Mountain Unit 1	do.	4,470-4,507	10-12-66	---	---	---	---	11,370	488	---	23,200	---	---	1,177 219,000 8.0	
28, 12	do.	do.	4,470-4,507	10-12-66	---	1,500	1,270	11,370	488	465	23,900	---	---	1,176 219,000 8.2		
24, 36, 20, 21	Federal Division 1	do.	1,071 <sup>10</sup> -4,610/1	11-4-66	---	---	---	---	157,000	---	---	12,800	3,460	1,008	22,0 18,360 6.7	
20, 21	do.	do.	2,134 <sup>11</sup> -4,610/1	11-4-66	---	---	---	---	160,000	---	---	---	1,177	---	59,500 6.4	
20, 21	do.	do.	4,000 <sup>12</sup> -4,610/1	11-4-66	---	---	---	---	161,000	---	---	---	1,176	---	---	
20, 21	do.	do.	5,500 <sup>13</sup> -4,610/1	11-4-66	---	---	---	---	160,000	---	---	---	1,179	---	220,000 8.3	
20, 21	do.	do.	1,500 <sup>14</sup> -4,610/1	11-15-72	---	820	1,592	66,389	288	14	6,215	101,688	---	1,109 ---		
26, 36, 4, 23	Southwest Jol Unit 1	do.	4,199-4,695	6-16-66	---	---	---	---	82,500	---	---	---	1,106	---	168,000 ---	

<sup>1</sup>/ Water does not represent formation fluid.

<sup>2</sup>/ Commercial service laboratory analysis.

<sup>3</sup>/ Density of oil at top of fluid column is 0.818 at 17.5°C.

<sup>4</sup>/ Spot samples in fluid column.

<sup>5</sup>/ Plunged-back production interval 640-906.

<sup>6</sup>/ Producing interval 290-319.

<sup>7</sup>/ Producing interval 3,716-3,919.

<sup>8</sup>/ Producing interval 4,278-4,285.

<sup>9</sup>/ Difference in chloride and sulfate due to determination by different methods.

<sup>10</sup>/ Producing interval 2,209-2,515.

<sup>11</sup>/ Producing interval 1,518-1,916.

<sup>12</sup>/ Density of oil at top of fluid column is 0.796 at 20°C.

Chemical constituents are in milligrams per liter.)

Note: (Wells are listed in order of increasing distance from Carlsbad, N. Mex., along trace of the Capitan aquifer. Analyses are by U.S. Geological Survey unless otherwise indicated.)

Unichem International  
 707 North Leech                    P.O. Box 1499  
 Hobbs, New Mexico 88240

Company : ANADARKO  
 Date : 10-10-1991  
 Location: TEAS YATES WSW #1 (on 10-10-1991)

	Sample 1
Specific Gravity:	1.075
Total Dissolved Solids:	105532
pH:	6.75
IONIC STRENGTH:	1.919

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<u>CATIONS:</u>		me/liter	mg/liter
Calcium	(Ca <sup>+2</sup> )	80.0	1600
Magnesium	(Mg <sup>+2</sup> )	60.0	729
Sodium	(Na <sup>+1</sup> )	1660	38100
Iron (total)	(Fe <sup>+2</sup> )	0.002	0.060
Barium	(Ba <sup>+2</sup> )	0.031	2.10
Manganese	(Mn <sup>+2</sup> )	0.003	0.090

<u>ANIONS:</u>		me/liter	mg/liter
Bicarbonate	(HCO <sub>3</sub> <sup>-1</sup> )	7.60	464
Carbonate	(CO <sub>3</sub> <sup>-2</sup> )	0	0
Hydroxide	(OH <sup>-1</sup> )	0	0
Sulfate	(SO <sub>4</sub> <sup>-2</sup> )	96.8	4650
Chloride	(Cl <sup>-1</sup> )	1690	60000

<u>DISSOLVED GASES</u>			
Carbon Dioxide	(CO <sub>2</sub> )	10.0	
Hydrogen Sulfide	(H <sub>2</sub> S)	119	

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SCALING INDEX (positive value indicates scale)

<u>Temperature</u>		Calcium Carbonate	Calcium Sulfate
86°F	30°C	-0.06	-17
122°F	50°C	0.87	-17
140°F	60°C	1.2	-17
168°F	76°C	1.8	-12
176°F	80°C	1.9	-12
200°F	93°C	2.4	-12

~~GESB~~  
UNICHEM INTERNATIONAL  
P.O. BOX 1499 707 NORTH LEECH STREET  
HOBBS, NEW MEXICO 88240  
*Well File*

Anadarko Petroleum Corp.  
P.O. Drawer 130  
Artesia , NM 88210

Report Date: October 21, 1991  
Lab In Date: October 21, 1991  
Sample Date: October 18, 1991

Dear Jerry Buckles

Listed below please find our water analysis report from Teas Yates

*Teas Yates WSN #1*  
Source Well :

Specific Gravity: 1.080  
Total Dissolved Solids: 111993  
PH: 6.50  
Ionic Strength: 2.050

CATIONS: mg/liter

Calcium:	(Ca <sup>++</sup> )	1400
Magnesium:	(Mg <sup>++</sup> )	1336
Sodium:	(Na <sup>+</sup> )	40062
Iron (Total)	(Fe <sup>++</sup> )	1.20
Barium	(Ba <sup>++</sup> )	0.00
Manganese:	(Mn <sup>++</sup> )	.48
Resistivity:		

ANIONS:

Bicarbonate:	(HCO <sub>3</sub> <sup>-</sup> )	415
Carbonate:	(CO <sub>3</sub> <sup>--</sup> )	0
Hydroxide:	(OH <sup>-</sup> )	0
Sulfate:	(SO <sub>4</sub> <sup>--</sup> )	3280
Chloride:	(Cl <sup>-</sup> )	65500

GASES:

Carbon Dioxide:	(CO <sub>2</sub> )	10.0
Oxygen:	(O <sub>2</sub> )	*****
Hydrogen Sulfide:	(H <sub>2</sub> S)	136.0

SCALE INDEX (Positive Value Indicates Scale Tendency) \* indicates tests were not run.

Temperature	CaCO <sub>3</sub> SI	CaSO <sub>4</sub> SI
86F 30.0C	-.37	-37.04
104F 40.0C	-.16	-36.66
122F 50.0C	.10	-35.52
140F 60.0C	.43	-34.66
158F 70.0C	.76	-34.08
176F 80.0C	1.15	-33.79

If you have any questions or require further information, please contact us.

Sincerely,  
*Sharon Wright*

Sharon Wright  
Laboratory Technician

cc: Charlie Copeland  
Jeff White - Midland

bc: Joe Hay  
John Offutt

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P O BOX 1466  
MONAHANS TEXAS 79756  
PH 943-3234 OR 963-1040

Martin Water Laboratories, Inc.

709 W INDIANA  
MIDLAND, TEXAS 79701  
PHONE 683-4521

RESULT OF WATER ANALYSES

TO: Mr. George Bushler  
P. O. Box 2497, Midland, TX 79702

LABORATORY NO. 1091211

SAMPLE RECEIVED 10-23-91

RESULTS REPORTED 10-28-91

COMPANY Anadarko Petroleum Corporation

LEASE Texas Water Well Survey

FIELD OR POOL

SECTION BLOCK SURVEY COUNTY Lee STATE NM

SOURCE OF SAMPLE AND DATE TAKEN:

NO. 1 Raw water - taken from Capitan Reef water supply well (3,700'). 10-22-91

NO. 2 from 3700' to 3762' Casing

NO. 3

NO. 4

REMARKS:

CHEMICAL AND PHYSICAL PROPERTIES

	NO. 1	NO. 2	NO. 3	NO. 4
Specific Gravity at 60° F.	1.0857			
pH When Sampled				
pH When Received	7.12			
Bicarbonate as HCO <sub>3</sub>	519			
Supersaturation as CaCO <sub>3</sub>				
Undersaturation as CaCO <sub>3</sub>				
Total Hardness as CaCO <sub>3</sub>	6,600			
Calcium as Ca	1,540			
Magnesium as Mg	668			
Sodium and/or Potassium	46,157			
Sulfate as SO <sub>4</sub>	4,208			
Chloride as Cl	72,439			
Iron as Fe	0.88			
Barium as Ba				
Turbidity, Electric				
Color as Pt				
Total Solids, Calculated	125,531			
Temperature °F.				
Carbon Dioxide, Calculated				
Dissolved Oxygen,				
Hydrogen Sulfide	95.0			
Resistivity, ohms/m at 77° F.	0.080			
Suspended Oil				
Filtrable Solids as mg/l				
Volume Filtered, ml				

Results Reported As Milligrams Per Liter

Additional Determinations And Remarks Please contact us if we can be of any assistance in interpretation of the above results.

## Unichem International

707 North Leech                    P.O.Box 1499  
 Hobbs, New Mexico 88240

Company : ANADARKO  
 Date    : 10-10-1991  
 Location: Exxon Federal #1 - Wellhead (on 8/12/91)

	Sample 1
Specific Gravity:	1.157
Total Dissolved Solids:	219389
pH:	6.30
Resistivity:	0.047 ohms ● 76°F
IONIC STRENGTH:	4.952

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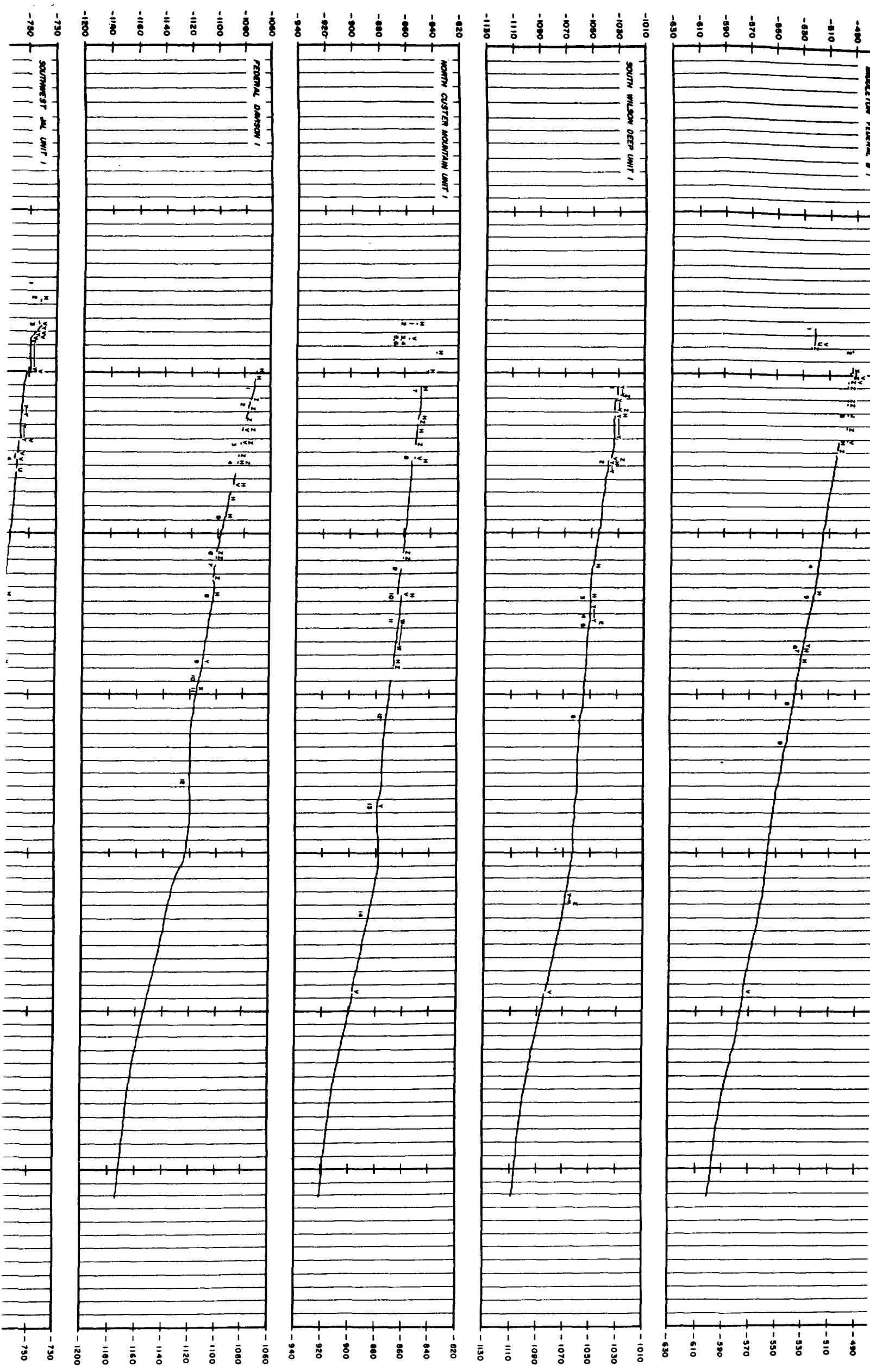
<u>CATIONS:</u>		me/liter	mg/liter
Calcium	(Ca <sup>+2</sup> )	1150	23000
Magnesium	(Mg <sup>+2</sup> )	832	10100
Sodium	(Na <sup>+1</sup> )	1980	45600
Iron (total)	(Fe <sup>+2</sup> )	0.752	21.0
Barium	(Ba <sup>+2</sup> )	0.051	3.50
Manganese	(Mn <sup>+2</sup> )	0.190	5.23

<u>ANIONS:</u>		me/liter	mg/liter
Bicarbonate	(HCO <sub>3</sub> <sup>-1</sup> )	4.20	256
Carbonate	(CO <sub>3</sub> <sup>-2</sup> )	0	0
Hydroxide	(OH <sup>-1</sup> )	0	0
Sulfate	(SO <sub>4</sub> <sup>-2</sup> )	9.89	475
Chloride	(Cl <sup>-1</sup> )	3950	140000

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SCALING INDEX (positive value indicates scale)

<u>Temperature</u>		Calcium	Calcium
		Carbonate	Sulfate
104°F	40°C	2.5	1.00
122°F	50°C	2.7	1.00
140°F	60°C	3.1	1.00
168°F	76°C	3.6	1.0
176°F	80°C	3.8	1.0



APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose:  Secondary Recovery  Pressure Maintenance  
Application qualifies for administrative approval
- II. Operator: Anadarko Petroleum Corporation  
Address: P. O. Drawer 130, Artesia, New Mexico 88210  
Contact party: Jerry E. Buckles Date: 505/748-3368
- 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

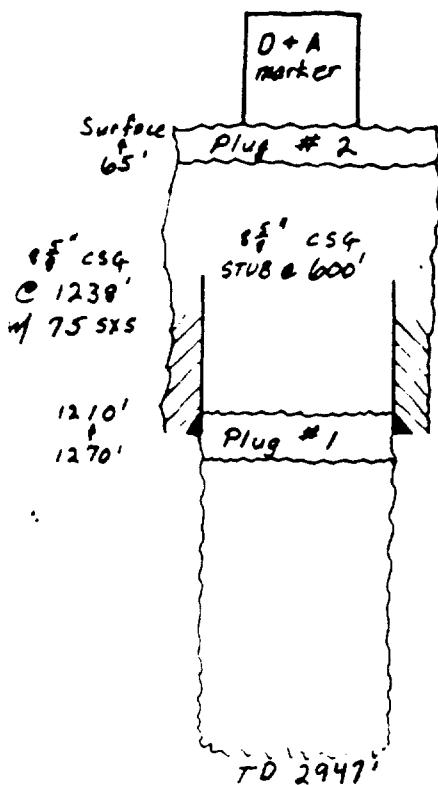
I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: George R.S. Buehler Title Staff Production Engineer

Signature: George R.S. Buehler Date: October 11, 1991

\* 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 A  
WELL DATA SHEET



Before Re-entry

Date Spudded: February 24, 1957

Plugged: March 2, 1957

8-5/8" casing @ 1238' w/75 sxs

14 jts 28#

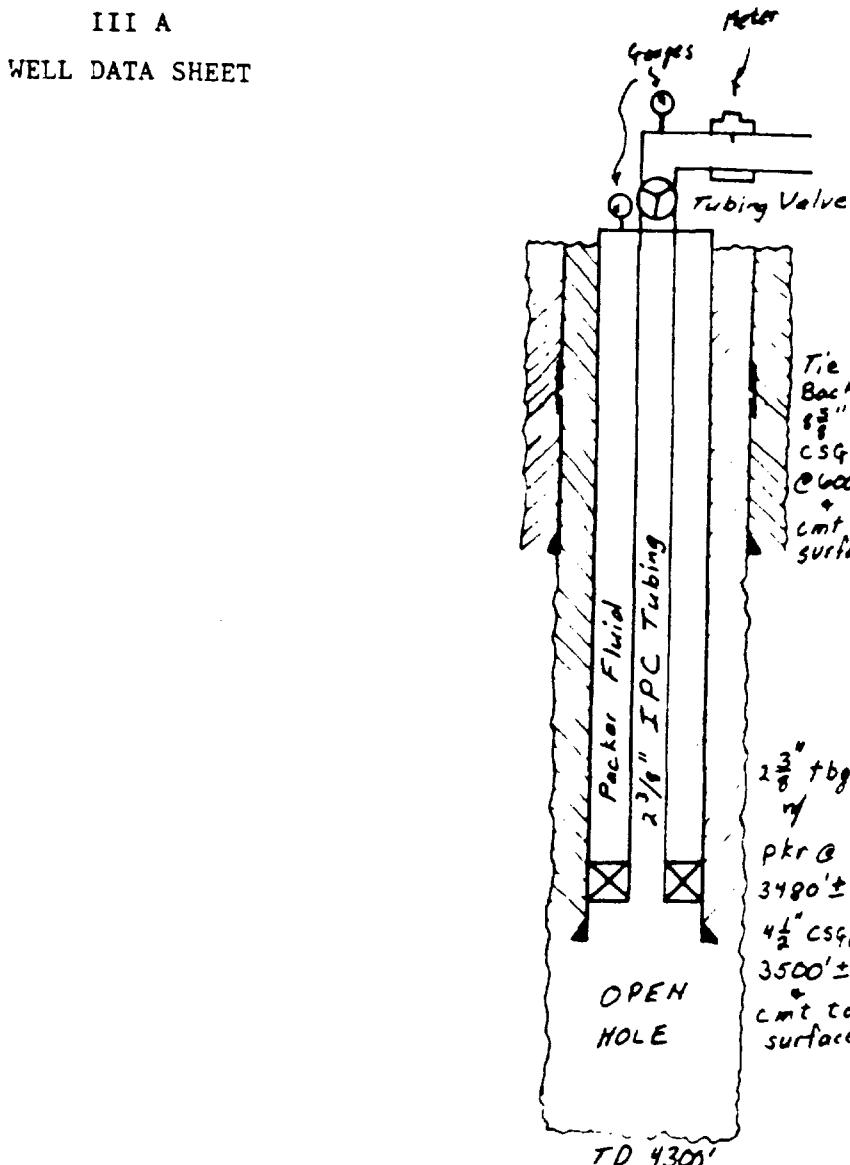
26 jts 24#

TD 2947'

Cut and pulled 600' of 8-5/8" casing plugs

#1 1270' to 1210'

#2 65' to surface



After Re-entry

8-5/8" casing 1238' to surface

1) Dress off csg stub & run fluid caliper

2) Bowl over & cement to surface

Drill new 7-7/8" hole 2947' to 4300'

Set 4-1/2 csg @ 3500' & cement to surface

Set 2-3/8" IPC tbg @ 3485' ± w/Arrow - Set

1 J-lock Injection Packer

(Injection Into Zone 3500' to 4300')

Estimated Avg. Inj 1000 BWPD

Estimated Avg Inj Pres 200 psi

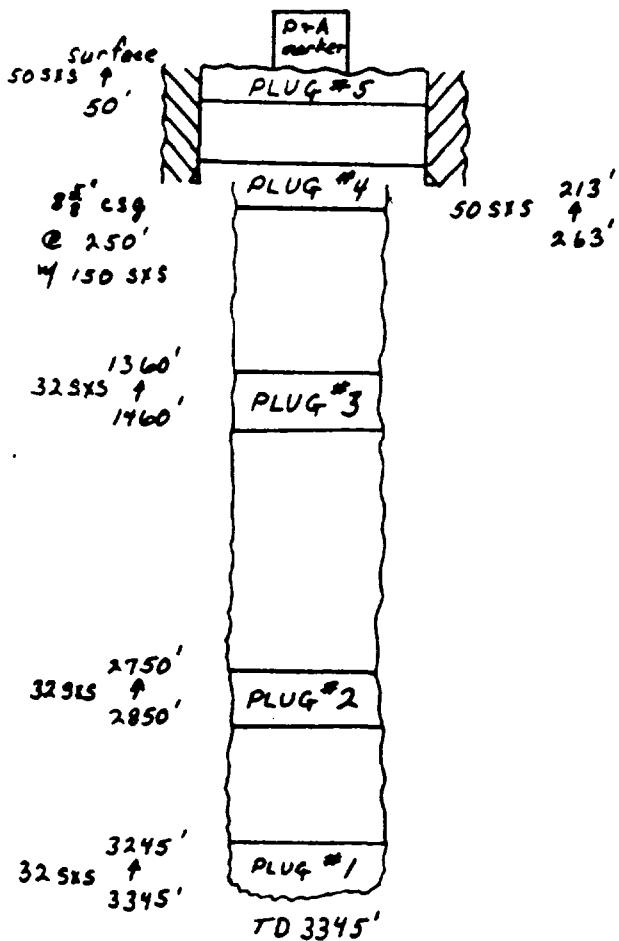
Estimated Maximum Pres 700 psi

### III B

- 1) Disposal Formation: Capitan Reef
- 2) Disposal Interval: 3500-4300 (Open Hole)
- 3) Well was originally drilled to a TD of 2947'.  
The original operator Hudson & Hudson, Inc. had filed an intent to drill to 3100' with rotary tools and then change to cable tools and drill to 4300', set 5-1/2" casing and complete an oil well with perforations. Hudson & Hudson, Inc. never finished drilling the well but instead plugged the well March 2, 1957.
- 4) Well was partially drilled and abandoned prior to TD.  
Plug #1 1270' to 1210' (amt cmt NR)  
8-5/8" csg cut & pulled @ 600'  
Plug #2 65' to surface (amt cmt NR)
- 5) The highest possible oil zone in this area is the Yates @ 2833' to 3255'.  
The next lower possible oil zone in this area is the Delaware @ 4977' to 7700'.



## WELL DATA SHEET



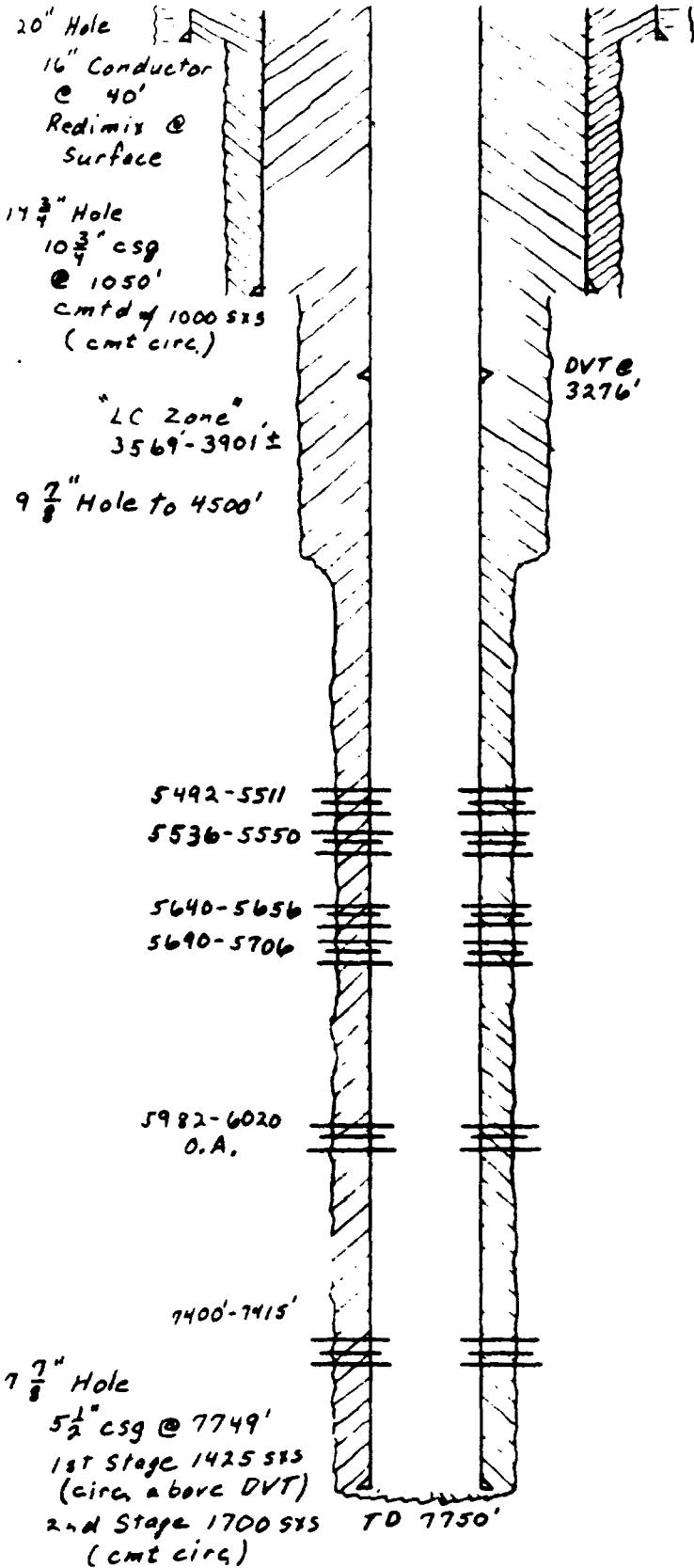
Date Spudded: July 4, 1960  
 Plugged: July 12, 1960  
 8-5/8" csg @ 250' w/150 sxs  
 TD 3345  
 Plug #1 32 sxs 3345'-3245'  
 Plug #2 32 sxs 2850'-2750'  
 Plug #3 32 sxs 1460'-1360'  
 Plug #4 50 sxs 263'-213'  
 Plug #5 50 sxs 50'-surface

NOTE: This well appears to  
 of penetrated the top  
 of the capitan reef.

(Applied for disposal  
 zone is 3500'-4300')

Federal "18" No. 5  
 1980' FSL & 2039' FWL  
 Sec. 18, T19S, R33E

## WELL DATA SHEET



Date Spudded: June 5, 1991  
 Completed: August 5, 1991  
 20" Hole  
 16" csg set @ 40' & redimixed to surface  
 14-3/4" Hole  
 10-3/4" csg set @ 1050'  
 Cmtd w/1000 sxs (cmt circ)  
 9-7/8" Hole to 4500'  
 LC @ 3569 to 3901±  
 Regain circ w/400 sxs cmt  
 Hole 7-7/8" (reduce bit size @ 4500')  
 TD 7750'  
 5-1/2" csg @ 7749  
 FC @ 7702  
 DVT @ 3276  
 1st stage w/1425 sxs (cmt to DVT)  
 Open DVT & circ out 75 sxs  
 2nd stage w/1700 sxs  
 circ out 227 sxs

## DELAWARE PERFORATIONS

perfs 7400-15 2 SPF  
 perfs 5982, 86, 89, 92, 96, 98, 6003, 08, 10  
 13, 16, 20 2 SPF  
 perfs 5640-56 & 5690-5706  
 perfs 5492-5511 & 5536-50 2 SPF

EXXON Federal No. 1  
 1980' FNL & 560' FWL  
 Sec. 19, T19S, R33E

- VII. 1) Avg inj rate 500 BWPD, Max inj rate 1000 BWPD  
2) Type system - Closed system  
3) 200 avg inj pres max inj pres 700 psi  
4&5) a) Water Analysis of EXXON Federal No. 1 - see attached analysis by Unichem #4a  
b) Compatability of two waters - see attached analysis by Unichem #4b  
c) Water Analysis of Capitan Reef Water from Anadarko's Teas Yates Unit Water Supply Well No. 1 in Section 14-20S-33E - see attached analysis by Unichem #4c
- VIII. a) Lithology - Limestone  
b) Geological Name - Capitan Reef  
c) Top/Reef-3255'  
d) Base/Reef-4977'  
e) Drinking Water  
1) Name of drinking water zone - Triassic  
2) Depth to bottom of drinking water zone - 850 feet  
3) Drinking Water under disposal zone - None
- IX. Proposed stimulation to disposal zone - 2000 gallons 15% HCl
- X. Logs & Tests - None, well was never drilled to TD
- XI. 1) Water analysis from drinking water well within 1 mile  
a) Location of drinking water well - Sec. 18, T19S, R33E  
b) Analysis - see attached sheet from State Engineer's Office  
c) Date sample taken - 2-15-83
- XII. See Exhibit XII
- XIII. The following list includes the names of all parties notified of Anadarko's intention to install and operate a water disposal well (namely the EXXON Federal SWD No. 1). See attached list.



Home Office 707 N. Leech, P.O. Box 1499 / Hobbs, NM 88240 / Ph. 505/393-7751, Fax 505/393-6754

October 10, 1991

Jerry Buckles  
Anadarko Petroleum Corp.  
P. O. Drawer 130  
Artesia, NM 88210

Dear Mr. Buckles:

Enclosed please find our water analyses and compatibility reports from the Teas Yates WSW #1 and Exxon Federal #1.

If you have any questions or require further information, please contact us.

Sincerely,

A handwritten signature in black ink, appearing to read "Sharon Wright".

Sharon Wright  
Laboratory Technician

SW/sr

cc: Bill Polk  
Joe Hay  
John Offutt  
Charlie Copeland  
Jeff White

UNICHEM INTERNATIONAL INC.

Unichem International  
 707 North Leech                    P.O. Box 1499  
 Hobbs, New Mexico 88240

Company : ANADARKO  
 Date : 10-10-1991  
 Location: Exxon Federal #1 - Wellhead (on 8/12/91)

	Sample 1
Specific Gravity:	1.157
Total Dissolved Solids:	219389
pH:	6.30
Resistivity:	0.047 ohms @ 76°F
IONIC STRENGTH:	4.952

<u>CATIONS:</u>	me/liter	mg/liter
Calcium                            (Ca <sup>+2</sup> )	1150	23000
Magnesium                        (Mg <sup>+2</sup> )	832	10100
Sodium                            (Na <sup>+1</sup> )	1980	45600
Iron (total)                    (Fe <sup>+2</sup> )	0.752	21.0
Barium                            (Ba <sup>+2</sup> )	0.051	3.50
Manganese                        (Mn <sup>+2</sup> )	0.190	5.23

<u>ANIONS:</u>	me/liter	mg/liter
Bicarbonate                      (HCO <sub>3</sub> <sup>-1</sup> )	4.20	256
Carbonate                        (CO <sub>3</sub> <sup>-2</sup> )	0	0
Hydroxide                        (OH <sup>-1</sup> )	0	0
Sulfate                            (SO <sub>4</sub> <sup>-2</sup> )	9.89	475
Chloride                           (Cl <sup>-1</sup> )	3950	140000

SCALING INDEX (positive value indicates scale)

<u>Temperature</u>		Calcium Carbonate	Calcium Sulfate
104°F	40°C	2.5	1.00
122°F	50°C	2.7	1.00
140°F	60°C	3.1	1.00
168°F	76°C	3.6	1.0
176°F	80°C	3.8	1.0

Unichem International  
 707 North Leech                            P.O. Box 1499  
 Hobbs, New Mexico 88240

Company : ANADARKO  
 Date : 10-10-1991  
 Location: TEAS YATES & EXXON FEDERAL - COMPATIBILITY (on 10-10-1991)

	<u>Sample 1</u>
Specific Gravity:	1.149
Total Dissolved Solids:	208003
pH:	6.35
IONIC STRENGTH:	4.649

---

<u>CATIONS:</u>	<u>me/liter</u>	<u>mg/liter</u>
Calcium                                    (Ca <sup>++</sup> )	1040	20800
Magnesium                                (Mg <sup>++</sup> )	755	9170
Sodium                                    (Na <sup>+</sup> )	1950	44800
Iron (total)                            (Fe <sup>++</sup> )	0.677	18.9
Barium                                    (Ba <sup>++</sup> )	0.049	3.36
Manganese                                (Mn <sup>++</sup> )	0.172	4.72

<u>ANIONS:</u>	<u>me/liter</u>	<u>mg/liter</u>
Bicarbonate                            (HCO <sub>3</sub> <sup>-1</sup> )	4.54	277
Carbonate                              (CO <sub>3</sub> <sup>-2</sup> )	0	0
Hydroxide                              (OH <sup>-1</sup> )	0	0
Sulfate                                   (SO <sub>4</sub> <sup>-2</sup> )	18.6	893
Chloride                                (Cl <sup>-1</sup> )	3720	132000

<u>DISSOLVED GASES</u>	<u>me/liter</u>	<u>mg/liter</u>
Carbon Dioxide                        (CO <sub>2</sub> )	1.00	
Hydrogen Sulfide                     (H <sub>2</sub> S)	11.9	
Oxygen                                (O <sub>2</sub> )	0	

---

SCALING INDEX (positive value indicates scale)

<u>Temperature</u>		<u>Calcium</u>	<u>Calcium</u>
		<u>Carbonate</u>	<u>Sulfate</u>
86°F	30°C	1.6	8.6
122°F	50°C	2.5	8.3
140°F	60°C	2.9	8.3
168°F	76°C	3.4	8.0
176°F	80°C	3.6	8.0
200°F	93°C	4.1	8.0

Comments:

COMPATIBILITY = TEAS YATES = 10% & EXXON FEDERAL FEDERAL = 90%

( O

The attached exhibit 4c is capitan reef water, sampled from Anadarko's Teas Yates Unit's Water Supply Well No. 1, located approximately 9 miles southwest of the EXXON Federal SWD No. 3. The WSW No. 1's legal is 1330' FNL & 1330' FWL of Section 14, T20S, R33E, Lea County. The producing capitan reef perforations are:

3660-3663  
3674-3681  
3696-3700  
3708-3711  
3724-3727  
3746-3749  
3758-3762

Anadarko produces approximately 3000 BWPD from the Teas Yates Unit WSW No. 1.

Unichem International  
 707 North Leech                    P.O. Box 1499  
 Hobbs, New Mexico 88240

Company : ANADARKO  
 Date : 10-10-1991  
 Location: TEAS YATES WSW #1 (on 10-10-1991)

	Sample 1
Specific Gravity:	1.075
Total Dissolved Solids:	105532
pH:	6.75
IONIC STRENGTH:	1.919

---

<u>CATIONS:</u>		me/liter	mg/liter
Calcium                            (Ca <sup>+2</sup> )	80.0	1600	
Magnesium                        (Mg <sup>+2</sup> )	60.0	729	
Sodium                            (Na <sup>+1</sup> )	1660	38100	
Iron (total)                    (Fe <sup>+2</sup> )	0.002	0.060	
Barium                            (Ba <sup>+2</sup> )	0.031	2.10	
Manganese                        (Mn <sup>+2</sup> )	0.003	0.090	

<u>ANIONS:</u>		me/liter	mg/liter
Bicarbonate                     (HCO <sub>3</sub> <sup>-1</sup> )	7.60	464	
Carbonate                       (CO <sub>3</sub> <sup>-2</sup> )	0	0	
Hydroxide                       (OH <sup>-1</sup> )	0	0	
Sulfate                           (SO <sub>4</sub> <sup>-2</sup> )	96.8	4650	
Chloride                        (Cl <sup>-1</sup> )	1690	60000	

<u>DISSOLVED GASES</u>		me/liter	mg/liter
Carbon Dioxide                (CO <sub>2</sub> )	10.0	1000	
Hydrogen Sulfide              (H <sub>2</sub> S)	119	11900	

---

SCALING INDEX (positive value indicates scale)

<u>Temperature</u>	me/liter	me/liter	me/liter
	Temperature	Temperature	Temperature
86°F	30°C	-0.06	-17
122°F	50°C	0.87	-17
140°F	60°C	1.2	-17
168°F	76°C	1.8	-12
176°F	80°C	1.9	-12
200°F	93°C	2.4	-12



**STATE OF NEW MEXICO**

**STATE ENGINEER OFFICE**

**ELUID MARTINEZ**  
STATE ENGINEER

**ROSWELL**

**DISTRICT II**  
1900 West Second St.  
Roswell, New Mexico 88201  
(505) 622-6521

**October 2, 1991**

**George Buehler**  
Anadarko Petro Corporation  
P. O. Box 2497  
Midland, Texas 79702

**Dear Mr. Buehler:**

**Please find enclosed the information you requested from our office concerning wells in the area of 19S.32E.**

**If our office can be of any further assistance to you, please do not hesitate to contact us.**

**Sincerely,**

A handwritten signature in black ink, appearing to read "Kenneth H. Fresquez".

**Kenneth Fresquez**  
**Field Supervisor**

**KP/lc**  
**enc.**



XII

I, George R.S. Buehler, affirm Anadarko's geological and engineering departments have reviewed the available geological 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.

Affirmed this day October 11, 1991

By George R.S. Buehler  
Staff Production Engineer

WELLSITE SURFACE OWNER AND OFFSET OPERATORS TO  
EXXON FEDERAL SWD NO. 1

Surface Owner

USA  
Carlsbad Resource Area  
P. O. Box 1778  
Carlsbad, New Mexico 88220

Offset Operators

19S-33E

Sec. 18 SW/4 SW/4 (Lot 4)  
Centenial  
Box 1837  
Roswell, New Mexico 88202

Sec. 18 Lot 3, E/2 SW/4, SE/4 and E/2 NE/4 Sec. 19  
Francis H. Hudson  
616 Texas Street  
Fort Worth, Texas 76102

Delmar H. Lewis  
616 Texas Street  
Fort Worth, Texas 76102

Edward R. Hudson, Jr.  
1000 First National Bldg.  
Fort Worth, Texas 76102

Sec. 19 Lot 1 & 2 W/2 NE/4 & E/2 NW/4 and SE/4 SE/4 Sec. 13-19S-32E  
Exxon Company, USA  
P. O. Box 1600  
Midland, Texas 7902-1600

Sec. 19 Lots 3 & 4, E/2 SW/4 & SE/4  
Firo Corporation  
P. O. Box 8148  
Roswell, New Mexico 88202

Partco, Inc.  
P. O. Drawer R  
Artesia, New Mexico 88210

Edward R. Hudson  
616 Texas Street  
Fort Worth, Texas 76102

William A. Hudson  
616 Texas Street  
Fort Worth, Texas 76102

XIII  
(Continued)

WELLSITE SURFACE OWNER AND OFFSET OPERATORS TO  
EXXON FEDERAL SWD NO. 1

Harvey E. Yates Co.  
P. O. Box 1933  
Roswell, New Mexico 88202

19S-32E

Sec. 24 NE/4  
Anadarko Petroleum Corporation  
P. O. Box 2497  
Midland, Texas 79702

**AFFIDAVIT OF PUBLICATION**

State of New Mexico,  
County of Lea.

I, Kathi Bearden,

of the Hobbs Daily News-Sun, a daily newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period

of \_\_\_\_\_

One weeks.  
Beginning with the issue dated

Oct. 1, 1991  
and ending with the issue dated

Oct. 1, 1991

Kathi Bearden  
General Manager

Sworn and subscribed to before

me this 8 day of

Oct, 1991  
Paula Parrish  
Notary Public.

My Commission expires \_\_\_\_\_

Aug. 5, 1995  
(Seal)

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937, and payment of fees for said publication has been made.



**ILLEGIBLE**

**REMARKS:** Complete items 1 and 3 when additional services are desired, and complete items 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. This postcard also will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Check postcard for boxes and check boxes (for additional services requested).

1.  Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery  
(Extra charge)

3. Article Addressed to:  
USA  
Carlsbad Resource Area  
P O Box 1778  
Carlsbad New Mexico 88220

4. Article Number  
**P-567 722 899**

Type of Service:  
 Registered       Insured  
 Certified       COD  
 Express Mail       Return Receipt  
for Merchandise

Always obtain signature of addressee  
or agent and DATE DELIVERED.

5. Addressee's Address (ONLY if payment made by addressee)  
*Betty Hill*

6. Signature - Agent  
*Betty Hill*

7. Date of Delivery  
**OCT 15 1988**

PS Form 3811, Mar. 1988 • U.S.G.P.O. 1988-212-866 DOMESTIC RETURN RECEIPT

**P-567 722 899**

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

See Reverse

6. To:  
**USA**  
**Carlsbad Resource Area**  
Street and No.  
**P O Box 1778**  
P.O. State and Zip Code  
**Carlsbad New Mexico 88220**  
Postage  
**.98**

7. U.S.G.P.O. 151506  
Certified Fee  
**1.00**

8. Special Delivery Fee  
**.00**

9. Restricted Delivery Fee  
**.00**

10. Return Receipt showing  
to whom and Date Delivered  
**1.00**

11. Return Receipt showing to whom  
and Date Delivered  
**.00**

12. Total Postage and Fees  
**2.98**

13. Postmark or Date  
**15 OCT 1988**

Fold at line over top of envelope to the right

**REMARKS:** Complete items 1 and 3 when additional services are desired, and complete items 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. This postcard also will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Check postcard for boxes and check boxes (for additional services requested).

1.  Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery  
(Extra charge)

3. Article Addressed to:  
Centennial  
Box 1837  
Roswell New Mexico 88202

4. Article Number  
**P-567 722 900**

Type of Service:  
 Registered       Insured  
 Certified       COD  
 Express Mail       Return Receipt  
for Merchandise

Always obtain signature of addressee  
or agent and DATE DELIVERED.

5. Addressee's Address (ONLY if payment made by addressee)  
*Centennial*

6. Signature - Agent  
*Centennial*

7. Date of Delivery  
**NOV 1 1988**

PS Form 3811, Mar. 1988 • U.S.G.P.O. 1988-212-866 DOMESTIC RETURN RECEIPT

**P-567 722 900**

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

See Reverse

6. To:  
**Centennial**  
Street and No.  
**Box 1837**  
P.O. State and Zip Code  
**Roswell New Mexico 88202**  
Postage  
**.98**

7. U.S.G.P.O. 151506  
Certified Fee  
**1.00**

8. Return Receipt showing to whom  
and Date Delivered  
**1.00**

9. Total Postage and Fees  
**2.98**

10. Postmark or Date  
**1 NOV 1988**

**ILLEGIBLE**

19

**INSTRUCTIONS:** Complete Items 1 and 2 when additional services are desired, and complete Items 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 address will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Check postmaster for fees and check boxes for additional services requested.

1.  Show to whom delivered, date, and addressee's address. 2.  Registered Delivery (Extra charge)

3. Article Addressed to:  Francis H Hudson 616 Texas Street Fort Worth Texas 76102	4. Article Number  P-567 722 901
Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt by Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address  X	
6. Signature - Agent  X <i>J. Clarke</i>	
7. Date of Delivery  OCT 17 1981	

PS Form 3811, Mar. 1983 • U.S.G.P.O. 1085-212-865 DOMESTIC RETURN RECEIPT

P-567 722 901

RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
See Reverse

Sent to  Francis H Hudson
Street and No. 616 Texas Street
P.O. State and ZIP Code Fort Worth Texas 76102
Postage • .98
Certified Fee 1.00
Special Delivery Fee • .10
Restricted Delivery Fee • .10
Return Receipt showing to whom and Date Delivered X
Return Receipt showing Date and Address of Delivery X
TOTAL Postage and Fees 2.98
Postmark or Date  <i>X BO</i>

PS Form 3800, June 1985

**INSTRUCTIONS:** Complete Items 1 and 2 when additional services are desired, and complete Items 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 address will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Check postmaster for fees and check boxes for additional services requested.

1.  Show to whom delivered, date, and addressee's address. 2.  Registered Delivery (Extra charge)

3. Article Addressed to:  Delmar H Lewis 616 Texas Street Fort Worth Texas 76102	4. Article Number  P-567 722 902
Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt by Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address  X	
6. Signature - Agent  X	
7. Date of Delivery  <i>J. Clarke</i> OCT 17 1981	

PS Form 3811, Mar. 1983 • U.S.G.P.O. 1085-212-865 DOMESTIC RETURN RECEIPT

PS Form 3800, June 1985

P-567 722 902

RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
See Reverse

Sent to  Delmar H Lewis
Street and No. 616 Texas Street
P.O. State and ZIP Code Fort Worth Texas 76102
Postage • .98
Certified Fee 1.00
Special Delivery Fee • .10
Restricted Delivery Fee • .10
Return Receipt showing to whom and Date Delivered X
Return Receipt showing Date and Address of Delivery X
TOTAL Postage and Fees 2.98
Postmark or Date  <i>2.98 DOWNTOWN FORT WORTH TX</i>

ILLEGIBLE

Fold at line over top of envelope to the right of the return address

P 143 463 010

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

See Reverse

Edward R. Hudson Jr.

616 Texas Street

Fort Worth, Texas 76102

.98

1.00

1.00

1.00

2.98

PS Form 3800, June 1985



**REMARKS:** Complete items 1 and 2 when additional services are desired, and complete items 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. This return receipt will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Check postmaster for fees and check boxes for additional service(s) requested.

1.  Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery (extra charge)

3. Article Addressed to:

Edward R. Hudson Jr  
616 Texas Street  
Fort Worth, Texas 76102

4. Article Number

P 143 463 010

Type of Service:

- Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt  
 BY AIR MAIL

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Z

6. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

OCT 23 1991

PS Form 3811, Mar. 1983 \* U.S.G.P.O. 1988-212-885

DOMESTIC RETURN RECEIPT

**REMARKS:** Complete items 1 and 2 when additional services are desired, and complete items 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. This return receipt will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Check postmaster for fees and check boxes for additional service(s) requested.

1.  Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery (extra charge)

3. Article Addressed to:

Exxon Company USA  
P O Box 1600  
Midland Texas 79702-1600

4. Article Number

P-567 722 904

Type of Service:

- Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt  
 BY AIR MAIL

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Z

6. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

OCT 14 1991

PS Form 3811, Mar. 1983

\* U.S.G.P.O. 1988-212-885

DOMESTIC RETURN RECEIPT

P-567 722 904

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

See Reverse

Sent to  
Exxon Company USA

Street and No.  
P O Box 1600

P O State and ZIP Code  
Midland Texas 79702

Postage \$ .98

Certified Fee \$ 1.00

Special Delivery Fee

Restricted Delivery Fee

Return Receipt showing  
to whom delivered  
Return Receipt showing to whom  
date and address delivered

Total Postage and Fees

.98

1.00

1.00

2.98

PS Form 3800, June 1985



ILLEGIBLE

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**Check Complete**

3 and 4  
Put your address in the space provided and the address of the person to whom you are sending the mail. Please do not put your name or address on the back of the envelope. Postage is to be paid by the addressee. If you are mailing a registered letter, attach the return address label to the front of the envelope. Please indicate the name of the addressee, the date of mailing, and the date of delivery. If you are mailing a certified letter, attach the return address label to the front of the envelope. Please indicate the name of the addressee, the date of mailing, and the date of delivery. If you are mailing a registered letter, attach the return address label to the front of the envelope. Please indicate the name of the addressee, the date of mailing, and the date of delivery.

1.  Show to whom delivered, date, and addressed's address. 2.  Registered Delivery (Please charge)

3. Article Addressed to:  
**Firo Corporation**  
P O Box 8148  
Roswell New Mexico 88202

4. Article Number  
**P-567 722 905**

Type of Service:  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt  
 Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address  
*Jessie M. Longley*

6. Signature - Agent  
*Jessie M. Longley*

7. Date of Delivery  
*10/12/85*

PS Form 3811, Mar. 1968 \* U.S. GPO 1968-212-866 \* DOMESTIC RETURN RECEIPT

**P-567 722 905**

**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE PROVIDED  
NO INTERNATIONAL MAIL  
See Reverse

U.S.G.P.O. 163606  
Sent to  
**Firo Corporation**  
Street and No.  
**P O Box 8148**  
P. O. Station and C. P. Code  
**Roswell New Mexico 88202**  
P. Stage  
**.98**  
Certified Fee  
**1.00**  
Special Delivery Fee  
**0.00**  
Restricted Delivery Fee  
**0.00**  
Return Receipt Fee  
**0.00**  
Return Receipt and Delivery Date  
**0.00**  
Return Receipt and Delivery Date and Address of Delivered  
**0.00**  
TOTAL Postage and Fees  
**2.98**

PS Form 3800, June 1965  
Postmark or Date

*MIDLAND TX 79701*

**Fold at line over top of envelope  
at the return side**

The copy of the permit sent to Partco, Inc. was returned by the postal service marked (ATTEMPTED NOT KNOWN). Anadarko attempted to locate Partco, Inc. through both the Artesia City Hall and the Artesia Chamber of Commerce. Anadarko believes Partco, Inc. no longer exists.

**P-567 722 906**

**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE PROVIDED  
NO INTERNATIONAL MAIL  
See Reverse

U.S.G.P.O. 163606  
Sent to  
**Partco Inc**  
Street and No.  
**P O Drawer R**  
P. O. Station and C. P. Code  
**Artesia New Mexico 88210**  
P. Stage  
**.98**  
Certified Fee  
**1.00**  
*MIDLAND TX 79701*  
Return Receipt Fee  
**0.00**  
Return Receipt and Delivery Date  
**0.00**  
Return Receipt and Delivery Date and Address of Delivered  
**0.00**  
TOTAL Postage and Fees  
**2.98**

PS Form 3800, June 1965  
Postmark or Date

*22*

**ILLEGIBLE**

P 143 463 011

RECEIPT FOR CERTIFIED MAIL

NO. 143 463 011

MAILING INFORMATION

See Reverse

William A. Hudson

616 Texas Street

Fort Worth, Texas 7610

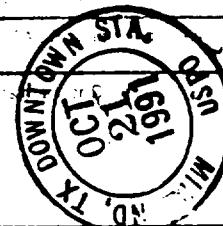
.98

1.00

1.00

2.98

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



1.  Complete Items 1 and 2 when additional services are desired, and complete Items 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 recipient 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 boxes for additional service(s) requested.

1.  Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery  
(extra charge)

3. Article Addressed to:

William A. Hudson  
616 Texas Street  
Fort Worth, Texas 76102

4. Article Number

P 143 463 011

Type of Service:

- Registered       Insured  
 Certified       COD  
 Express Mail       Return Receipt  
                          for Merchandise

Always obtain signature of addressee  
or agent and DATE DELIVERED.

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

6. Signature - Address

X

7. Signature - Agent

X

7. Date of Delivery

OCT 23 1991

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

1.  Complete Items 1 and 2 when additional services are desired, and complete Items 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 recipient 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 boxes for additional service(s) requested.

1.  Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery  
(extra charge)

3. Article Addressed to:

Harvey E Yates  
P O Box 1933  
Roswell New Mexico 88202

4. Article Number

P-576 722 914

Type of Service:

- Registered       Insured  
 Certified       COD  
 Express Mail       Return Receipt  
                          for Merchandise

Always obtain signature of addressee  
or agent and DATE DELIVERED.

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

6. Signature - Address

X

7. Signature - Agent

X

7. Date of Delivery

10-15-91

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

P-567 722 914

PT FOR CERTIFIED MAIL

NO. 567 722 914

NOT FOR INTERNATIONAL USE

See Reverse

Sent to

Harvey E Yates

Street and No.

P O Box 1933

P O State and ZIP Code

Roswell New Mexico 88202

Postage

.98

Certified Fee

1.00

Special Delivery Fee

Restricted Delivery Fee

Return Receipt showing to whom  
Date Delivered

1.00

Return Receipt showing to whom  
Date and Address of Delivery

100% Aufage and Fees

2.98

Postmark or Date

23

ILLEGIBLE

Fold at line over top of envelope to the right  
of the return address.