

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
May 15, 1992

OIL CONSERVATION DIVISION
RECEIVED
MAY 15 1992 AM 8 52

Case 10497

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NO. P 960 242 147

State of New Mexico
Oil Conservation Commission
P. O. Box 2088
Santa Fe, New Mexico 87504

Attention: Mr. David Catanach

Re: Application for Authorization
to Inject - Government "K" No. 2
Unit K, Sec. 23, T18S-R32E
Lea County, New Mexico

Gentlemen:

Enclosed please find the following documents which are submitted in support of our application to convert the subject well to water injection.

1. The original and one (1) copy of OCD Form C-108 and all appropriate attachments except for analysis of the proposed injection waters. These waters are currently at a laboratory and results will be forwarded upon completion.
2. A copy of analogous information which has been submitted to the BLM in Carlsbad.

Per our phone conversation we do understand that this application cannot be administratively approved and request that a hearing be set for June 11, 1992. Also, please be reminded that converting the subject well to injection is being performed as an injectivity test in cooperation with potential participants in a proposed Querecho Plains-Bone Spring Unit.

Mr. David Catanach


- 2 -

May 15, 1992

If further information is required, please advise.

Very truly yours,

MEWBOURNE OIL COMPANY


Kevin Mayes
Engineer

KM:gt
Enclosures

Copy to: Oil Conservation Division
Hobbs, New Mexico

Case 10497

APPLICATION FOR AUTHORIZATION TO INJECT

I. Purpose: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? yes no

II. Operator: Mewbourne Oil Company

Address: P. O. Box 7698, Tyler, Texas 75711

Contact party: Kevin Mayes/Ken Calvert Phone: (903) 561-2900

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: Kevin Mayes Title: Engineer

Signature: *Kevin Mayes* Date: May 15, 1992

* 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.

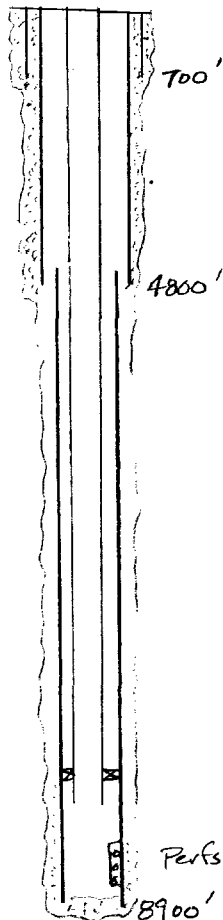
NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

ITEM III OF NEW MEXICO OCD FORM C-108
INJECTION WELL DATA SHEET

MEWBOURNE OIL CO. Government K #2
OPERATOR LEASE

1950 FSL, 1980 FWL Sec 23 T1B5 R 32 E
WELL NO. FOOTAGE LOCATION SECTION TOWNSHIP RANGE

Schematic



Tabular Data

Surface Casing

Size 13 3/8 " Cemented with 700 sv.
 TOC _____ feet determined by _____
 Hole size _____

Intermediate Casing

Size 8 5/8 " Cemented with 3100 sv.
 TOC _____ feet determined by _____
 Hole size _____

Long string

Size 5 1/2 " Cemented with 900 sv.
 TOC _____ feet determined by _____
 Hole size _____

Total depth 8901'

Injection interval

8454 feet to 8515 feet
 (perforated or open-hole, indicate which)

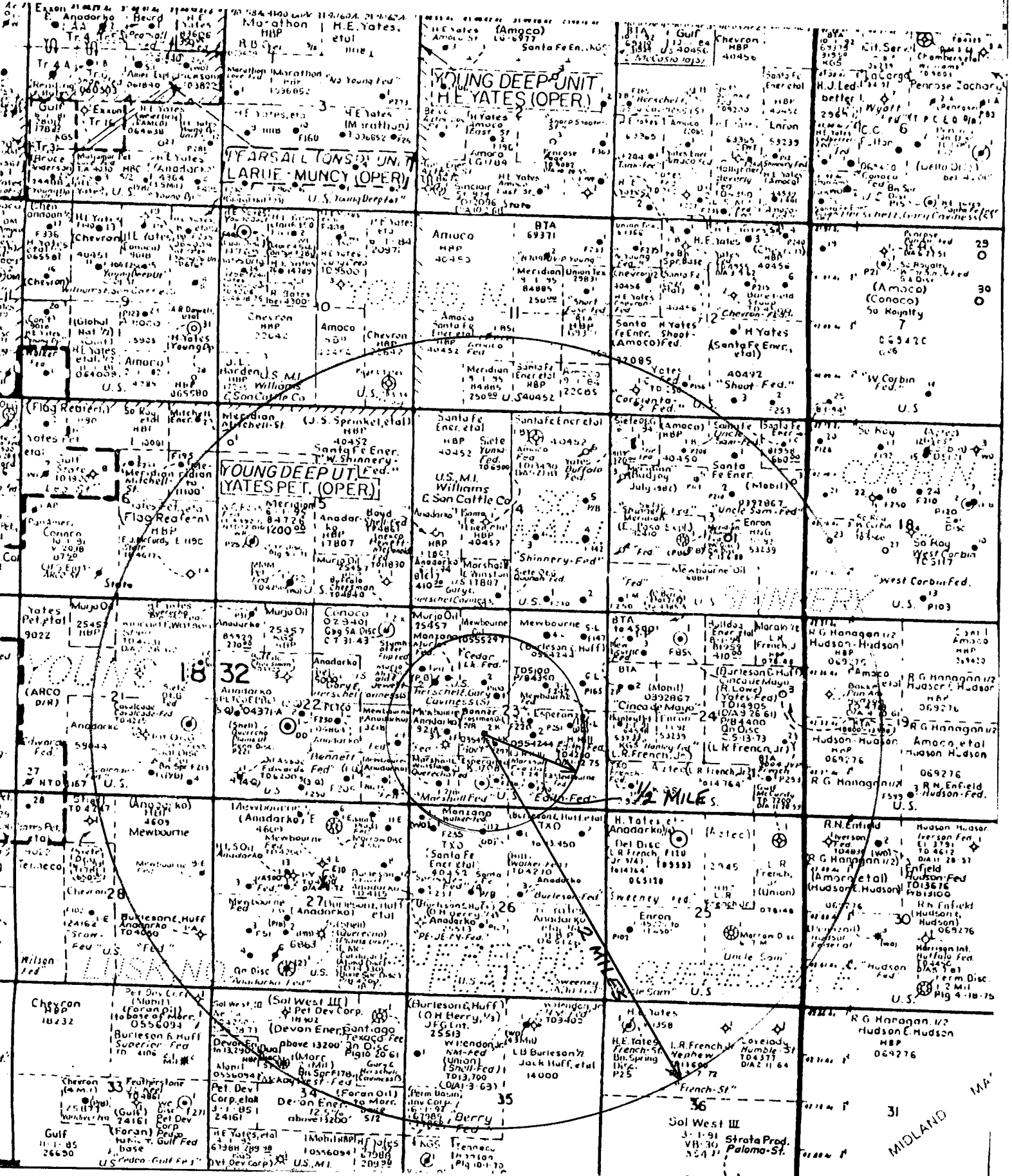
Tubing size 2 7/8" lined with bare steel set in a
(material)
Otis Permalatch packer at 8365' feet
(brand and model)

(or describe any other casing-tubing seal).

Other Data

- Name of the injection formation 1st Bone Spring Sand
- Name of Field or Pool (if applicable) Querecho Plains
- Is this a new well drilled for injection? Yes No
 If no, for what purpose was the well originally drilled? OIL PRODUCTION
- 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) _____
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. _____

ITEM V OF NEW MEXICO OCD FORM C-108
MAP OF ALL WELLS WITHIN 2 MILES OF INJECTOR
QUERRECHO PLAINS GOVERNMENT "K" NO. 2



ITEM VI OF NEW MEXICO OGD FORM C-108
WELLS WITHIN REVIEW AREA WHICH PENETRATE THE 1ST BONE SPRING SAND
QUERRECHO PLAINS GOVERNMENT # 2
5-12-92/RWH

OPERATOR	LEASE/WELL	LOCATION	TYPE	CONSTRUCTION	DATE DRILLED	TD	COMPLETION & COMMENTS
MANZANO OIL CO.	MURJO FED #1	T18S, R32E, SEC 23 1850 FNL, 990 FWL	OIL	13 3/8 @ 350' CMT W/ 350 SX 8 5/8 @ 277' CMT W/ 1200 SX 5 1/2 @ 10800' CMT W/ 650 SX	6/25/87	11780'	PERF & TEST 10648'-10726' PERF & TEST 10172'-10223' PERF & TEST 9619'-9670' SQZ PERFS 9619'-9670' W/ 1150 SX PERF & TEST 9726'-9743' PERF & TEST 9192'-9210' CIRP @ 9460' OPEN PERFS 8283'-8426' RET. BP @ 8506'
HERBOURNE OIL CO.	CEDAR LAKE FED #2	T18S, R32E, SEC 23 1980 FNL, 1980 FWL	OIL	13 3/8 @ 478' CMT W/ 500 SX 8 5/8 @ 4286' CMT W/ 1400 SX 5 1/2 @ 8708' CMT W/ 1075 SX	11/10/86	8700'	OPEN PERFS 8435'-8501'
HERBOURNE OIL CO.	FED #43	T18S, R32E, SEC 23 1980 FNL, 1650 FWL	OIL	13 3/8 @ 450' CMT W/ 416 SX 8 5/8 @ 4315' CMT W/ 1700 SX 5 1/2 @ 8698' CMT W/ 1475 SX	6/19/87	8698'	OPEN PERFS 8446'-8526'
HERBOURNE OIL CO.	FED #47	T18S, R32E, SEC 23 2310 FSL, 990 FWL	OIL	8 5/8 @ 356' CMT W/ 250 SX 5 1/2 @ 8670' CMT W/ 4630 SX	5/14/88	8670'	DEEPEM FROM OFD @ 4281' (1975) OPEN PERFS 8486'-8552'
HERBOURNE OIL CO.	FED #42	T18S, R32E, SEC 23 2310 FSL, 2030 FWL	OIL	13 3/8 @ 441' CMT W/ 450 SX 8 5/8 @ 4293' CMT W/ 1800 SX 5 1/2 @ 8750' CMT W/ 925 SX	10/14/86	8750'	OPEN PERFS 8458'-8531'
HERBOURNE OIL CO.	FED #43	T18S, R32E, SEC 23 1980 FSL, 990 FWL	OIL	13 3/8 @ 480' CMT W/ 275 SX 8 5/8 @ 4285' CMT W/ 1700 SX 5 1/2 @ 8570' CMT W/ 1375 SX	12/31/86	8570'	OPEN PERFS 8362'-8446'
MARSHALL & WINSTON INC.	QUERRECHO FED #1	T18S, R32E, SEC 23 610 FSL, 760 FWL	OIL	13 3/8 @ 354' CMT W/ 385 SX 8 5/8 @ 3047' CMT W/ 1475 SX 5 1/2 @ 8665' CMT W/ 1250 SX	12/31/85	9580'	OPEN PERFS 8414'-8447'
MARSHALL & WINSTON INC.	QUERRECHO FED #2	T18S, R32E, SEC 23 760 FSL, 2310 FWL	OIL	13 3/8 @ 374' CMT W/ 385 SX 8 5/8 @ 3010' CMT W/ 1300 SX 5 1/2 @ 8703' CMT W/ 1100 SX	5/6/86	9100'	OPEN PERFS 8459'-8526'
HERBOURNE OIL CO.	FED #41	T18S, R32E, SEC 23 660 FSL, 1980 FWL	OIL	13 3/8 @ 459' CMT W/ 400 SX 8 5/8 @ 4345' CMT W/ 1700 SX 5 1/2 @ 9050' CMT W/ 1050 SX	4/22/86	9050'	OPEN PERFS 8474'-8538'
MARATHON	SPRINGBLE FED #2	T18S, R32E, SEC 26 660 FNL, 1980 FWL	OIL	8 5/8 @ 547' CMT W/ 400 SX 5 1/2 @ 8711' CMT W/ 1950 SX	10/2/85	8711'	OPEN PERFS 8542'-8574'

ITEM VII OF NEW MEXICO OCD FORM C-108
DATA ON PROPOSED OPERATIONS
QUERECHO PLAINS GOVERNMENT K #2
5-12-92/KMM

- ITEM VII (1) Proposed maximum injection rate is 800 bwpd/injector.
- ITEM VII (2) The injection system will be operated as a closed system.
- ITEM VII (3) The injection pressure will be held to a maximum of 1690 psi (0.2 psi/ft * 8454'). If no detriment is seen from this pressure then administrative approval may be requested for higher pressures.
- ITEM VII (4) The source of injection water will be produced water from the Bone Spring, Delaware and/or Queen formations. If additional water is required the city of Carlsbad will be approached for a tap on their Caprock system. A copy of the water analyzes is attached.
- ITEM VII (5) Not applicable.

ITEM VIII OF NEW MEXICO OCD FORM C-108
GEOLOGIC DATA ON THE INJECTION ZONE & UNDERGROUND DRINKING WATER
QUERECHO PLAINS GOVERNMENT K #2
5-12-92/KMM

The zone being targeted for water injection at Querecho Plains is the First Bone Spring sand at depths from 8328'-8620' in the well Federal L NO. 4, Section 23, T18S, R32E. The First Bone Spring sands are a sequence of well consolidated sandstone, siltstone, and shale strata, with localized carbonate deposition, of Permian age cemented with calcareous material. An eight percent porosity cut off is use to determine net pay as porosity less than eight percent is considered impermeable at the existing and proposed reservoir pressure and reservoir fluid regimes. Impermeable carbonate deposits exist above and below the targeted sands thus defining the permeable limits of the reservoir. All injected fluids should remain in the reservoir with the exception of cycling to the surface through wellbores.

Based on communications with the New Mexico State Engineer's Roswell office (Ken Fresquez) and OCD files at Hobbs there appears to be only one fresh water well within T18S & R32E. This well's total depth was 270' and is located in the NW, NW, SE, SE, NW of section 20. The source strata tapped by this well is the Triassic "Red Beds" and the only other strata Mr. Fresquez referred to as potentially fresh was the Alluvium which is shallower than the "Red Beds". There are no known fresh water strata underlying the Bone Spring.

ITEMS IX THROUGH XII
QUERECHO PLAINS GOVERNMENT K #2
5-12-92/KMM

- ITEM IX. Government K #2 has an existing fracture stimulation and it is assumed that the well will be treated with acid at least once during the life of injection.
- ITEM X. All logging and test data for the existing wellbores already exists on file with the state of New Mexico Oil Conservation Division (OCD) and will not be resubmitted with this application.
- ITEM XI. As stated in ITEM VIII, it appears the only strata within one mile of our proposed unit which contains water of possible drinking quality is confined to 270' and shallower. No contamination of this drinking water should occur as all existing wellbores which penetrate the Bone Spring in the proposed area have surface casing set at a minimum depth of 350' with cement completely circulated behind this casing from setting depth to surface. In addition and to the best of my knowledge there are no fresh water wells within one mile of this proposed injector.
- ITEM XII. After reviewing the geology of the Bone Spring Sand strata in a one and one-half mile radius around the proposed unit area, no evidence appears of fractures or any hydrologic connection between the target sands and any overlying or underlying strata.

MEWBOURNE OIL COMPANY
APPLICATION FOR AUTHORIZATION TO INJECT
GOVERNMENT "K" NO. 2
LEA COUNTY, NEW MEXICO

CERTIFICATE OF SERVICE

I, Kevin Mayes, Engineer, Mewbourne Oil Company, Operator of the Government "K" No. 2, have on this 15th day of May 1992, mailed or caused to be mailed, postage prepaid a copy of the Application for Authorization to Inject to the following persons at the address shown:

LAND OWNER

Bureau of Land Management
P. O. Box 1397
Roswell, New Mexico 88220

OFFSET OPERATORS

Ken Barbee
Monzano Oil Corporation
P. O. Box 2107
Roswell, New Mexico 88202-2107

C. W. Stumhoffer
General Operating Company
1007 Ridglea Bank Building
Fort Worth, Texas 76116

Edith Petty
Esperanza Energy Corporation
17400 Dallas Parkway, Suite 210
Dallas, Texas 75287-7399

Tom Brandt
Marshall & Winston, Inc.
P. O. Box 50880
Midland, Texas 79710-0880

Clarence Forister
Frostman Oil Company/Happy Oil Company
P. O. Drawer W
Artesia, New Mexico 88210



Kevin Mayes
Engineer

Subscribed in my presence and duly sworn to before me on this 15th day of May, 1992.



GAYLON THOMPSON
Notary Public, State of Texas
My Comm. Expires 4/30/93



Notary Public in and for Smith
County, Texas

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
May 15, 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NO. P 960 242 152

Marshall & Winston, Inc.
P. O. Box 50880
Midland, Texas 79710-0880

Attention: Mr. Tom Brandt

Re: Application for Authority to
Inject - Government "K" No. 2
1950' FSL & 1980' FWL
Sec. 23, T18S-R32E
Lea County, New Mexico

Dear Mr. Brandt:

Attached is Mewbourne Oil Company's application requesting approval to inject water in the Government "K" No. 2 well located at the above captioned location.

This application will be heard June 11, 1992 at the Division's office in Santa Fe, New Mexico. Any objections to the application should be filed with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87504-2088 within fifteen (15) days.

If you have any questions regarding this application, please contact me or Ken Calvert at (903) 561-2900.

Very truly yours,

MEWBOURNE OIL COMPANY


Kevin Mayes
Engineer

KM:gt
Attachments

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
May 15, 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NO. P 960 242 151

General Operating Company
1007 Ridglea Bank Building
Fort Worth, Texas 76116

Attention: Mr. C. W. Stumhoffer

Re: Application for Authority to
Inject - Government "K" No. 2
1950' FSL & 1980' FWL
Sec. 23, T18S-R32E
Lea County, New Mexico

Dear Mr. Stumhoffer:


Attached is Mewbourne Oil Company's application requesting approval to inject water in the Government "K" No. 2 well located at the above captioned location.

This application will be heard June 11, 1992 at the Division's office in Santa Fe, New Mexico. Any objections to the application should be filed with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87504-2088 within fifteen (15) days.

If you have any questions regarding this application, please contact me or Ken Calvert at (903) 561-2900.

Very truly yours,

MEWBOURNE OIL COMPANY


Kevin Mayes
Engineer

KM:gt
Attachments

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
May 15, 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NO. P 960 242 150

Frostman Oil Company/Happy Oil Company
P. O. Drawer W
Artesia, New Mexico 88210

Attention: Mr. Clarence Forister

Re: Application for Authority to
Inject - Government "K" No. 2
1950' FSL & 1980' FWL
Sec. 23, T18S-R32E
Lea County, New Mexico

Dear Mr. Forister:


Attached is Mewbourne Oil Company's application requesting approval to inject water in the Government "K" No. 2 well located at the above captioned location.

This application will be heard June 11, 1992 at the Division's office in Santa Fe, New Mexico. Any objections to the application should be filed with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87504-2088 within fifteen (15) days.

If you have any questions regarding this application, please contact me or Ken Calvert at (903) 561-2900.

Very truly yours,

MEWBOURNE OIL COMPANY


Kevin Mayes
Engineer

KM:gt
Attachments

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
May 15, 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NO. P 960 242 149

Esperanza Energy Corporation
17400 Dallas Parkway, Suite 210
Dallas, Texas 75287-7399

Attention: Ms. Edith Petty

Re: Application for Authority to
Inject - Government "K" No. 2
1950' FSL & 1980' FWL
Sec. 23, T18S-R32E
Lea County, New Mexico

Dear Ms. Petty:

Attached is Mewbourne Oil Company's application requesting approval to inject water in the Government "K" No. 2 well located at the above captioned location.

This application will be heard June 11, 1992 at the Division's office in Santa Fe, New Mexico. Any objections to the application should be filed with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87504-2088 within fifteen (15) days.

If you have any questions regarding this application, please contact me or Ken Calvert at (903) 561-2900.

Very truly yours,

MEWBOURNE OIL COMPANY


Kevin Mayes
Engineer

KM:gt
Attachments

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
May 15, 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NO. P 960 242 148

Monzano Oil Corporation
P. O. Box 2107
Roswell, New Mexico 88202-2107

Attention: Mr. Ken Barbee

Re: Application for Authority to
Inject - Government "K" No. 2
1950' FSL & 1980' FWL
Sec. 23, T18S-R32E
Lea County, New Mexico

Dear Mr. Barbee:

Attached is Mewbourne Oil Company's application requesting approval to inject water in the Government "K" No. 2 well located at the above captioned location.

This application will be heard June 11, 1992 at the Division's office in Santa Fe, New Mexico. Any objections to the application should be filed with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87504-2088 within fifteen (15) days.

If you have any questions regarding this application, please contact me or Ken Calvert at (903) 561-2900.

Very truly yours,

MEWBOURNE OIL COMPANY


Kevin Mayes
Engineer

KM:gt
Attachments

COUNTY

Lea

POOL

Querecho Plains - Bone Springs

Upper

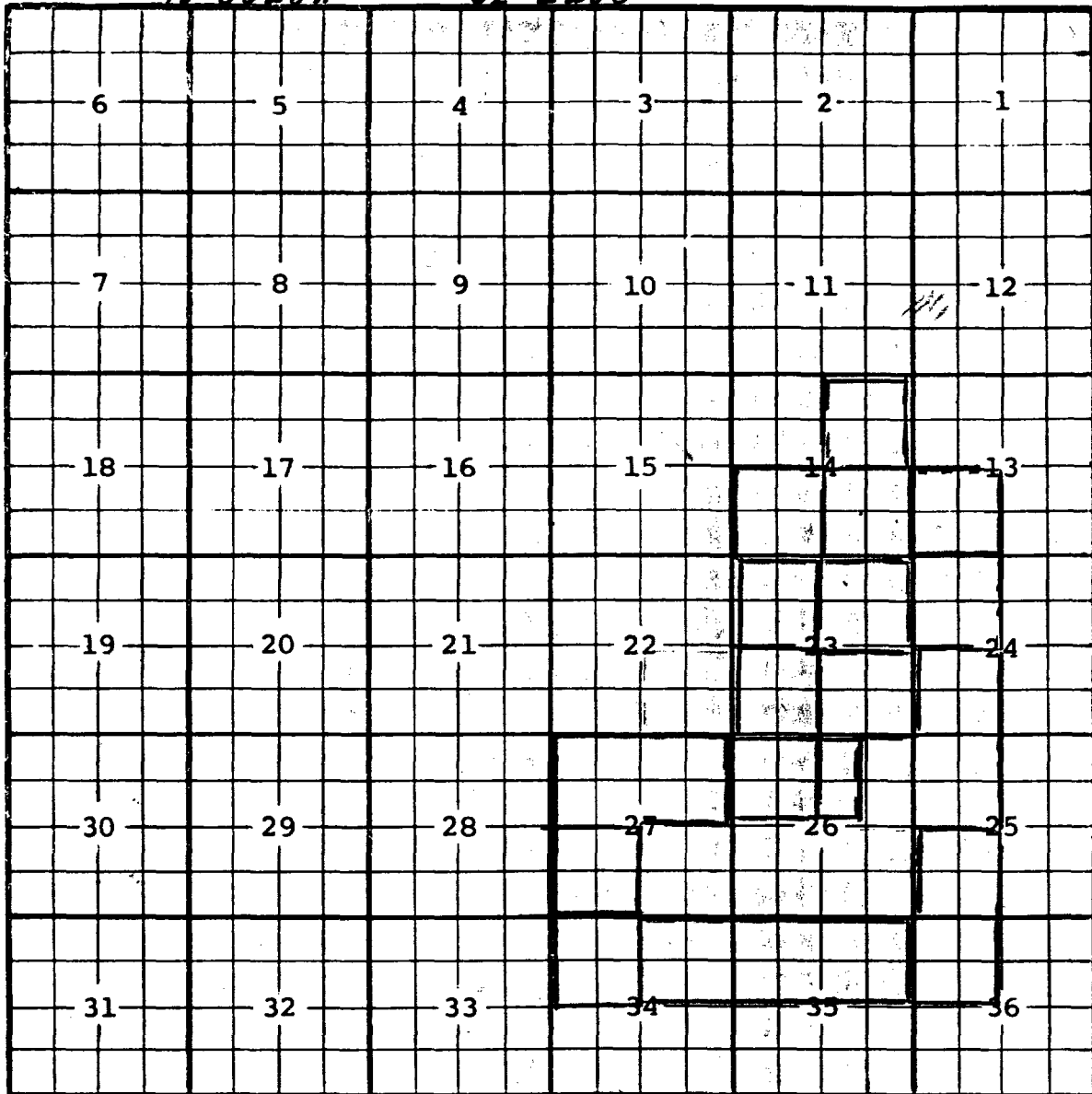
TOWNSHIP

18-South

RANGE

32-East

NMPM



Description: $\frac{5}{8}$ Sec. 27, (R-1424, 7-1-59).

Ext. $\frac{NW}{4}$ Sec. 34 (R-5987, 4-1-79) Redesignated "UPPER" Bone Springs
with vertical limits set at 9390' - 8180' (R-6332-A, 2-21-80)

Ext: $\frac{NE}{4}$ Sec. 34, $\frac{N}{2}$ Sec. 35 (R-7396, 12-9-83) Ext: $\frac{N}{2}$ Sec. 27 (R-8024, 8-30-85)

Ext: $\frac{NW}{4}$ Sec. 26 (R-8041, 10-3-85)

Ext: $\frac{SW}{4}$ Sec. 23, $\frac{SW}{4}$ Sec. 25, $\frac{W}{2}$ $\frac{NE}{4}$ Sec. 26, $\frac{NW}{4}$ Sec. 36 (R-8214, 5-1-86)

Ext: $\frac{SW}{4}$ Sec. 24, $\frac{NW}{4}$ Sec. 25, $\frac{E}{2}$ $\frac{NE}{4}$ and $\frac{S}{2}$ Sec. 26, $\frac{SE}{4}$ Sec. 27 (R-8233, 5-29-86)

Ext: $\frac{SE}{4}$ Sec. 23 (R-8277, 8-14-86) Ext: $\frac{SE}{4}$ Sec. 22 (R-8340, 11-3-86)

Ext: $\frac{NW}{4}$ Sec. 23 (R-8409, 7-7-87) Ext: $\frac{NE}{4}$ Sec. 23 (R-8533, 10/28/87)

EXT: $\frac{SW}{4}$ sec 14 (R-8856, 1-29-89) EXT: $\frac{SE}{4}$ sec 14 (R-8901, 4-1-89)

EXT: $\frac{SW}{4}$ sec 13 (R-8946, 7-1-89) EXT: $\frac{NW}{4}$ sec 24 (R-9741, 9-1-89) EXT: $\frac{NE}{4}$ sec 14,
(R-9120, 3-1-90)

Submit 5 Copies
 Appropriate District Office
DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
 Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

OIL CONSERVATION DIVISION
 RECEIVED
 '92 APR 17 AM 10 03

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

Operator MEWBOURNE OIL COMPANY		Well API No. 30-025-29749
Address P. O. Box 7698, Tyler, Texas 75711		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	* Effective date April 1, 1992
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator BONNER PLUMBING INC., RT. 4, BOX 866, LUBBOCK, TX. 70424		

II. DESCRIPTION OF WELL AND LEASE

Lease Name GOVERNMENT "K"	Well No. 2	Pool Name, including Formation Querecho Plains-Upper Bone	Kind of Lease State, Federal and Other	Lease No. USA-NM-0554967
Location Springs				
Unit Letter K	1950	Feet From The SOUTH	Line and 1980	Feet From The WEST
Section 23	Township 18S	Range 32E	County LEA	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transportation Company	Address (Give address to which approved copy of this form is to be sent) Box 2288, Houston, Texas 77251-1188
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ? K 23 18S 32E Yes 12-19-86

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Gaylon Thompson
 Signature
Gaylon Thompson, Engr. Oprns. Secretary
 Printed Name
April 8, 1992 (903) 551-2900
 Date Telephone No.

OIL CONSERVATION DIVISION

APR 13 '92
 Date Approved
 By *Gaylon Thompson*
 Title **DISTRICT 1 SUPERVISOR**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

USA-NM-0554967

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

OIL CONSERVATION DIVISION
RECEIVED

1. OIL WELL GAS WELL OTHER

'91 SEP 16 AM 10 02

2. NAME OF OPERATOR
Bonner Plbg. Inc.

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Government K

3. ADDRESS OF OPERATOR
Rt. 4 Box 866, Lubbock, Tx. 79424

9. WELL NO.

2

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

10. (FIELD AND POOL, OR WILDCAT)
Quechero Plains

Upper Bone Springs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 23 T-18S, R-32E

14. PERMIT NO.

15. ELEVATIONS (Show whether DP, RT, GR, etc.)

GR-3770

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input checked="" type="checkbox"/>		

ADD PERFS.

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input checked="" type="checkbox"/>		

Add Perfs

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

9-11 91 Install Bop POH W-pump, TBG, TAC & SN
Set cast iron bridge plug 100 ft. above the existing perfs, cement and come up hole and prepare to perf upper formation.

9-12-91 Brace-jet 4 holes at 4860 ft. Acidize, swab, turn well to production.

RECEIVED
AUG 30 10 29 AM '91
CARLSON DISTRICT OFFICE
AREA ENGINEERS

18. I hereby certify that the foregoing is true and correct

SIGNED David A. Bonner TITLE President

DATE 8-29-91

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE PETROLEUM ENGINEER

DATE 9/9/91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

JUN 27 1988

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PERMITS OFFICE	

I. Operator Bonner Plumbing Inc.

Address Rt. 4 Box 866 Lubbock, Texas 79424

Reason(s) for filing (Check proper box)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

Other (Please explain) To change Operator name to; Bonner Plbg. Inc.

If change of ownership give name and address of previous owner Sonship Oil Producing & Oper. Inc. 702 Greenway Plaza Suite 2000 Houston, Tx. 77046

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Government K</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Querecho Plains-Upper Bone Springs</u>	Kind of Lease <u>State, Federal or Fee Federal</u>	Lease No. <u>USA-N. 055496</u>
Location <u>Unit Letter K : 1950 Feet From The South Line and 1980 Feet From The West</u>				
Line of Section <u>23</u> Township <u>18S</u> Range <u>32-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Koch Service Inc.</u>	<u>P.O. Box 1558 Breckenridge Tx. 76024</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips 66 Natural Gas Co.</u>	<u>P.O. Box 2105 Hobbs N.M. 88246</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>K</u> Sec. <u>23</u> Twp. <u>18-S</u> Rge. <u>32-E</u>	<u>yes</u> <u>12-19-86</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Creed A. Bonner
(Signature)
President
(Title)

5-23-88
(Date)

OIL CONSERVATION DIVISION

JUN 20 1988

APPROVED _____, 19____

BY _____

TITLE OIL & GAS INSPECTOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple completed wells.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 03-01-83
Page 1

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Sonship Oil Producing & Operating, Inc.

Address
8416 Wayne Avenue, Lubbock, Texas 79424

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinthead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
<input type="checkbox"/> Recompletion		
<input checked="" type="checkbox"/> Change in Ownership		

Other (Please explain)
To change operator name from Mobil Producing Texas & New Mexico, Inc.

If change of ownership give name and address of previous owner
Mobil Producing Texas & New Mexico, Inc., 9 Greenway Plaza, Ste. 2700, Houston, Texas 77046

II. DESCRIPTION OF WELL AND LEASE

Lease Name Government "K"	Well No. 2	Pool Name, Including Formation Querecho Plains Upper Bone Springs	Kind of Lease State, Federal or Fee Federal	Lease No. USA-NM 0554967
Location Unit Letter <u>K</u> ; <u>1950</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>23</u> Township <u>18-S</u> Range <u>32-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Service, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, Texas 76024
Name of Authorized Transporter of Casinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2105, Hobbs, New Mexico 88240
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>23</u> Twp. <u>18-S</u> Rge. <u>32-E</u>	Is gas actually connected? <u>Yes</u> When <u>12/19/86</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Tommy Vinson
(Signature)
Secretary-Treasurer
(Title)
4-11-88
(Date)

OIL CONSERVATION DIVISION
APPROVED APR 22 1988
BY [Signature]
TITLE Geologist

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

OIL WELL		Date First New Oil Run To Tanks		Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.			Gas - MCF			

GAS WELL				
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		Choke Size

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other copies must be
verbal)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

RECEIVED

5. LEASE DESIGNATION AND SERIAL NO.
USA-NM-0554967

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a well. Use "APPLICATION FOR PERMIT" for such proposals.)

10-22-AM '87

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mobil Producing TX & NM Inc.		8. FARM OR LEASE NAME Government "K"	
3. ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Houston, TX 77046		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1950 FSL & 1980 FWL		10. FIELD AND POOL, OR WILDCAT Quechero Plains Upper Bone Springs	
14. PERMIT NO.		11. SPEC. T., S., N., OR B.L. AND SUBSTY OR AREA Sec. 23, T-18S, R-32E	
15. ELEVATIONS (Show whether of, to, or, etc.) GR-3770		12. COUNTY OR PARISH 13. STATE Lea NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <u>Add Perfs</u>	<input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recombination Report and Log form.)	

17. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS** (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and some pertinent to this work.)
- 8-5-87 MIRU X-pert WS #24, POH W/pmp, tbg, TAC, SN
 - 8-6-87 Perf W/1 JSPF @ 8343-49, 8360-63, 8384-8410, 8412-15 (42 holes), RIH W/RBP & pkr to 8440, PT pkr 1500# - Lost 700#-5min, Re-set RBP @ 8434, rel pkr & RBP.
 - 8-7-87 RIH W/RBP & pkr, tst tbg found 2 collar leaks, set RBP @ 8440 - PT 1500# - 10 min - OK (Isolate perfs 8454-8515), Set pkr @ 8253, PT 500#. Acdz 8343-8415 W/6100 gal 7½% HCL Acid + 80 RCNBS, fl W/50 bbl 2% KCL.
 - 8-11-87 POH W/pkr & RBP.
 - 8-12-87 Perf W/2 JSPF @ 8833-8844 (24 holes).
 - 8-13-87 Set pkr @ 8743. Acdz 8833-44 W/1600 gal 15% Di-FE HCL + 50 RCNBS, fl W/52 bbl 2% KCL.
 - 8-15-87 POH W/pkr. Set CIBP @ 8800. RIH W/2 3/8 SN-8564, 2 7/8 SN-8563, TAC-8159 on 264 jts 2 7/8 tbg (202' off btm).
 - 8-17-87 RIH W/2 x 1½ x 20 pump, PT tbg 500# - OK RDMO, turn well to production.
Bone Springs Perfs: 8343-8415
8454-8515
- PBTD = 8800

18. I hereby certify that the foregoing is true and correct

SIGNED Nancy Lewis TITLE Mobil Exploration & Producing U.S. Inc. as Agent for Mobil Producing TX & NM Inc. DATE _____

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
SEP 21 1987
SJS

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Mobil Producing TX & NM Inc.

Address: 9 Greenway Plaza, Suite 2700, Houston, TX 77046

Reason(s) for filing (Check proper box):

<input type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> casinghead Gas
	<input type="checkbox"/> Dry Gas
	<input type="checkbox"/> Condensate

Other (Please explain):

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Government "K"	Well No. 2	Pool Name, including Formation Querecho Plains Upper Bone	Kind of Lease State, Federal or Fee federal	Lease No. UAS-NM 0554967
Location Spring				
Unit Letter <u>K</u> ; <u>1950</u> Feet From The <u>south</u> Line and <u>1980</u> Feet From The <u>west</u>				
Line of Section <u>23</u> Township <u>18-S</u> Range <u>32-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Service, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76024
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2105, Hobbs, N.M. 88240
If well produces oil or liquids, give location of tanks.	Unit, Sec., Twp., Rge. K, 23, 18-S, 32-E
	Is gas actually connected? When yes, 12/19/86

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Madys M. Sullivan
(Signature)
Authorized Agent
(Title)
3/27/87
(Date)

OIL CONSERVATION DIVISION
APPROVED MAR 31 1987, 19
BY [Signature]
TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diffl. Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (spot, back pr.)	Tubing Pressure (Shot-1 $\frac{1}{2}$)	Casing Pressure (Shot-1 $\frac{1}{2}$)	Choke Size

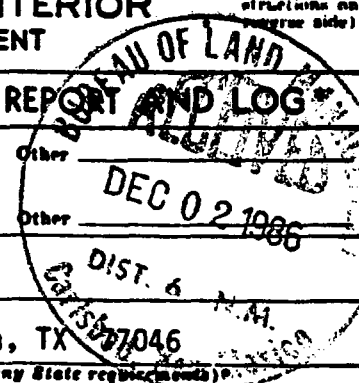
RECEIVED
 MAR 30 1987
 O.C.D.
 HTBBS OFFICE

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE (See other instructions on reverse side)

Form 1 Bureau No. 1004-0157 Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG



1. TYPE OF WELL: OIL WELL [X] GAS WELL [] DRY [] Other []
2. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [] REPAIR [] PLUG BACK [] DIFF. REMV. [] Other []
3. NAME OF OPERATOR: Mobil Producing TX & NM Inc.
4. ADDRESS OF OPERATOR: 9 Greenway Plaza, Suite 2700, Houston, TX
5. LOCATION OF WELL: At surface 1950' FSL & 1980' FWL
At top prod. interval reported below Same as surface
At total depth Same as surface

6. LEASE DESIGNATION AND SERIAL NO.: USA-NM-0554967
7. IF INDIAN, ALLOTTEE OR TRIBE NAME
8. PERMIT AGREEMENT NAME
9. FARM OR LEASE NAME: Government "K"
10. WELL NO.: 2
11. FIELD AND POOL OR WILDCAT: Querecho Plains Upper Bone Spring
12. SEC., T., R., E., M., OR BLOCK AND SURVEY OR AREA: Sec. 23, T-18-S, R-32-E
13. COUNTY OR PARISH: Lea
14. STATE: New Mexico

15. DATE SPUNDED: 9-19-86
16. DATE T.D. REACHED: 10-6-86
17. DATE COMPL. (Ready to prod.): 11-11-86
18. ELEVATIONS (DF, RKB, RT, GR, ETC.): GR-3770
19. ELEV. CASINGHEAD
20. TOTAL DEPTH, MD & TVD: 8900
21. PLUG. BACK T.D., MD & TVD: 8856
22. IF MULTIPLE COMPL., HOW MANY?
23. INTERVALS DRILLED BY:
24. PRODUCING INTERVAL(S) OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD): 8454-8517 OA Bone Spring formation
25. WAS DIRECTIONAL SURVEY MADE: NO
26. TYPE ELECTRIC AND OTHER LOGS RUN: Spectral Density Dual Spaced Neutron, Dual Guard Micro Guard
27. WAS WELL CORDED: NO

28. CASING RECORD (Report all strings set in well)
Table with columns: CASING SIZE, WEIGHT, LB./FT., DEPTH SET (MD), HOLE SIZE, CEMENTING RECORD, AMOUNT PULLED
13-3/8" 48# 700' 17-1/2" 700x C & 2% CALCHL & 1/4# FC
8-5/8" 23# & 32# 4800' 12-1/4" 3100x C & 2% CALCHL in 3 stages
7-7/8"

29. LINER RECORD
Table with columns: SIZE, TOP (MD), BOTTOM (MD), PACKER CEMENT, SCREEN (MD)
5-1/2" 4408' 8900' 900x H
30. TUBING RECORD
Table with columns: SIZE, DEPTH SET (MD), PACKER SET (MD)
2-7/8" 8556' 8314'

31. PERFORATION RECORD (Interval, size and number)
Perf 8454-8456, 8473-8496, 8499-8501, 8507-8515 (39 holes)
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
Table with columns: DEPTH INTERVAL (MD), AMOUNT AND KIND OF MATERIAL USED
8484-8515 Frac w/50,000 gal mini-max 340 & 700,000# 20/40 sand.

33. PRODUCTION
Table with columns: DATE FIRST PRODUCTION, PRODUCTION METHOD, WELL STATUS, DATE OF TEST, HOURS TESTED, CHOKED SIZE, PROD'N. FOR TEST PERIOD, OIL—BBL., GAS—MCF., WATER—BBL., GAS-OIL RATIO
11-13-86 2"x1-1/2"x24" Pump 7-1/2"x120" SPM Producing
11-24-86 24 1304
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.): Flared
35. LIST OF ATTACHMENTS: Logs

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED: Gladys M. Sulliva TITLE: Authorized Agent DATE: 12-1-86
TEST WITNESSED BY: D. R. Seale
DEC 2 1986

(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Rustler	1145	3902	Anhydrite			
Queen	3902	4748	Sand-Limestone			
San Andres	4748	5371	Dolomite			
Delaware	5371	6835	Sand-Shale-Limestone			
Bone Spring	6835	8900	Limestone-sand			

DEC 3 1986
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 HOBBS CRUISE

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
Mobil Producing TX & NM Inc.

Address
9 Greenway Plaza, Suite 2700, Houston, TX 77046

Reason(s) for filing (Check proper box)		Other (Please explain)
<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Government "K"	Well No. 2	Pool Name, including Formation Querecho Plains Upper Bone Spring	Kind of Lease State, Federal or Fee Federal	Lease No. UAS-NM 0554967
Location				
Unit Letter <u>K</u>	: <u>1950</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u>			
Line of Section <u>23</u>	Township <u>18-S</u>	Range <u>32-E</u>	<u>NMPM</u>	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Service, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit <u>K</u> Sec. <u>23</u> Twp. <u>18-S</u> Req. <u>32-E</u>
	Is gas actually connected? <u>Flared</u> When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Gladys M. Sullenter
(Signature)

Authorized Agent

12-1-86

(Title)

(Date)

OIL CONSERVATION DIVISION
APPROVED DEC 4 1986, 19____
BY [Signature]
TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-19-86	Date Compl. Ready to Prod. 11-11-86	Total Depth 8900		P.B.T.D. 8856					
Elevations (DF, RKB, RT, CR, etc.) GR-3770	Name of Producing Formation Bone Spring	Top Oil/Gas Pay 8454		Tubing Depth 8556					
Perforations 8454-8456, 8473-8496, 8499-8501, 8507-8515							Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	700'	700x C
12-1/4"	8-5/8"	4800'	3100x C
7-7/8"	5-1/2" (Liner)	4408'-8900'	900x H

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-13-86	Date of Test 11-24-86	Producing Method (Flow, pump, gas lift, etc.) 2" x 1-1/2" x 24' Pump (7-1/2" x 120" SPM)	
Length of Test 24 Hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 69	Water - Bbls. 24	Gas - MCF 90

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT
OPERATOR	
PRODUCTION OFFICE	

I. Operator Mobil Producing TX & NM Inc.

Address 9 Greenway Plaza, Suite 2700, Houston, TX 77046

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate		Request testing allowable for November of 1500 Bbls.
<input type="checkbox"/> Change in Ownership				Bone Spring perms: 8454-8517

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Government "K"</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Querecho Plains Upper Bone Spring</u>	Kind of Lease <u>State, Federal or Fee Federal</u>	Lease No. <u>USA-NM 0554967</u>
Location				
Unit Letter <u>K</u>	: <u>1950</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u>			
Line of Section <u>23</u>	Township <u>18-S</u>	Range <u>32-E</u>	<u>NMPM,</u>	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Koch Service, Inc.</u>	<u>P. O. Box 1558, Breckenridge, TX 76024</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>K 23 18-S 32-E NO</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Madys M. Sullivan
(Signature)

Authorized Agent

November 17, 1986

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 20 1986, 19

BY [Signature]
TITLE Geologist

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multiple completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
		X		X					
Date Drilled	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
9-19-86	11-11-86	8900			8856				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
GR-3770	Bone Spring	8454			8314				
Perforations							Depth Casing Shoe		
8454-8456, 8473-8496, 8499-8501, 8507-8517									

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	700'	700x C
12-1/4"	8-5/8"	4800'	3100x C
7-7/8"	5-1/2" (Liner)	4408'-8900'	900x H

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 NOV 19 1986
 C. P. B.
 HOBBE OFFICE

WELL NAME AND NUMBER Government "K" #2 1001

LOCATION Section 23, T18S, R32E, Lea County, New Mexico
(New Mexico give U.S.T.&R. - Texas give S, BLK, SURV. and TWP)

OPERATOR Mobil Producing Texas and New Mexico, Inc.

DRILLING CONTRACTOR MORANCO Drilling, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

<u>Degrees and Depth</u>	<u>Degrees and Depth</u>	<u>Degrees and Depth</u>	<u>Degrees and Depth</u>
<u>1/4 325</u>	<u>3/4 4800</u>		
<u>1/2 450</u>	<u>1 5293</u>		
<u>3/4 700</u>	<u>1/2 5783</u>		
<u>3/4 1030</u>	<u>1/2 6251</u>		
<u>3/4 1313</u>	<u>1/4 6746</u>		
<u>1/4 1808</u>	<u>1 1/2 7190</u>		
<u>1 1/4 2308</u>	<u>1 3/4 7691</u>		
<u>1 2666</u>	<u>2 1/2 8094</u>		
<u>1 3047</u>	<u>2 1/4 8273</u>		
<u>1/2 3540</u>	<u>2 8492</u>		
<u>3/4 4040</u>	<u>2 8900</u>		
<u>3/4 4518</u>			

Drilling Contractor MORANCO Drilling, Inc.

By Wiley Gilmore
Wiley Gilmore - Marketing Manager

Subscribed and sworn to before me this 16th day of October 19 86

My Commission expires:

January 30, 1989

Susie Branyon
Notary Public Susie Branyon
Lea County, New Mexico

RECEIVED

OCT 32 1986

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. USA-NM-0554967
NAME OF OPERATOR Mobil Producing TX & NM Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Houston, TX 77046		7. UNIT AGREEMENT NAME
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1950 FSL & 1980 FWL		8. FARM OR LEASE NAME Government "K"
15. PERMIT NO.		9. WELL NO. 2
16. ELEVATIONS (Show whether SP, ST, OR, etc.) GR-3770		10. FIELD AND POOL, OR WILDCAT Querecho Plains Upper Bone Spring
17. COUNTY OR PARISH		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 23, T-18S, R-32E
18. STATE		12. COUNTY OR PARISH Lea
19. STATE		13. STATE NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	CELL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <u>Casing</u>	<input checked="" type="checkbox"/>

*(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- 9-29/10-5-86 Drlg
- 10-6-86 TD 7 7/8" hole, logging.
- 10-7-86 Logging.
- 10-8-86 RIH W/22 jts 17# + 83 jts 15.5# 5 1/2" K 55 ST&C W/10 centl, TOL @ 4408, cmt @ 8900 W/900 sx CL H, displ W/110 BFW, 56 bb1 mud, WOC, BLM not witnessed.
- 10-9-86 WOC 18 hrs, tag cmt stringers @ 3058; hard cmt @ 4400, Pt csg 1000# - 30 Min - OK, RDMO.

ACCEPTED FOR RECORD

OCT 20 1986

CARLSBAD, NEW MEXICO

I hereby certify that the foregoing is true and correct,

SIGNED *Nancy Lewis* TITLE Authorized Agent DATE 10-16-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

USA-NM-0554967

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Mobil Producing TX & NM Inc.

3. ADDRESS OF OPERATOR
9 Greenway Plaza, Suite 2700, Houston, TX 77046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1950 FSL & 1980 FWL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Government "K"

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Querecho Plains
Upper Bone Spring

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA

Sec. 23, T-18S, R-32E

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, ST, OR, etc.)

GR-3770

12. COUNTY OR PARISH

13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Casing	

(NOTE: Report results of multiple completion on Well Completion or Re-completion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- 9-22-86 Drlg
- 9-26-86 TD 12 1/4" hole
- 9-27-86 RIH W/114 jts 8 5/8" 23# K55 ST&C W/8 centl, cmt @ 4800 W/2700 sx C + 300 sx C Neat, circ 500 sx, capped foam cmt W/100 sx C, WOC, job witnessed by Jack Johnson, BLM-Hobbs.
- 9-28-86 WOC 18 hrs., pt csg 2500# - OK, drlg new form.

ACCEPTED FOR RECORD
[Signature]
OCT 20 1986
CARLSBAD, NEW MEXICO



18. I hereby certify that the foregoing is true and correct

SIGNED *Nancy Lewis* TITLE Authorized Agent DATE 10-6-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

B. LEASE DESIGNATION AND SERIAL NO.
USA-NM-0554967

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. WELL TYPE OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mobil Producing TX & NM Inc.		8. FARM OR LEASE NAME Government "K"	
3. ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Houston, TX 77046		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1950 FSL & 1980 FWL		10. FIELD AND POOL OR WILDCAT Querecho Plains Upper Bone Spring	
14. PERMIT NO.		11. SEC., T., R., N., OR BLM. AND SURVEY OR AREA Sec. 23, T-18S, R-32E	
15. ELEVATIONS (Show whether DF, ST, OR, etc.) GR-3770		12. COUNTY OR PARISH Lea	13. STATE NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <u>SPUD</u>	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

- 9/17-18/86 MIRU Moranco Rig #10
- 9/19/86 SPUD 17½ hole, drlg.
- 9/20/86 TD 17½ hole, RIH w/17 jts 13-3/8 48#
H40 w/7 centL, cmt @ 700 w/700 sx cl C, circ 190 sx, HWO 16%,
WOC, Job witnessed by Walter Cox, BLM-Hobbs
- 9/21/86 WOC 18 hrs, Tst csg 600# - 30 min - ok, drlg new form

18. I hereby certify that the foregoing is true and correct

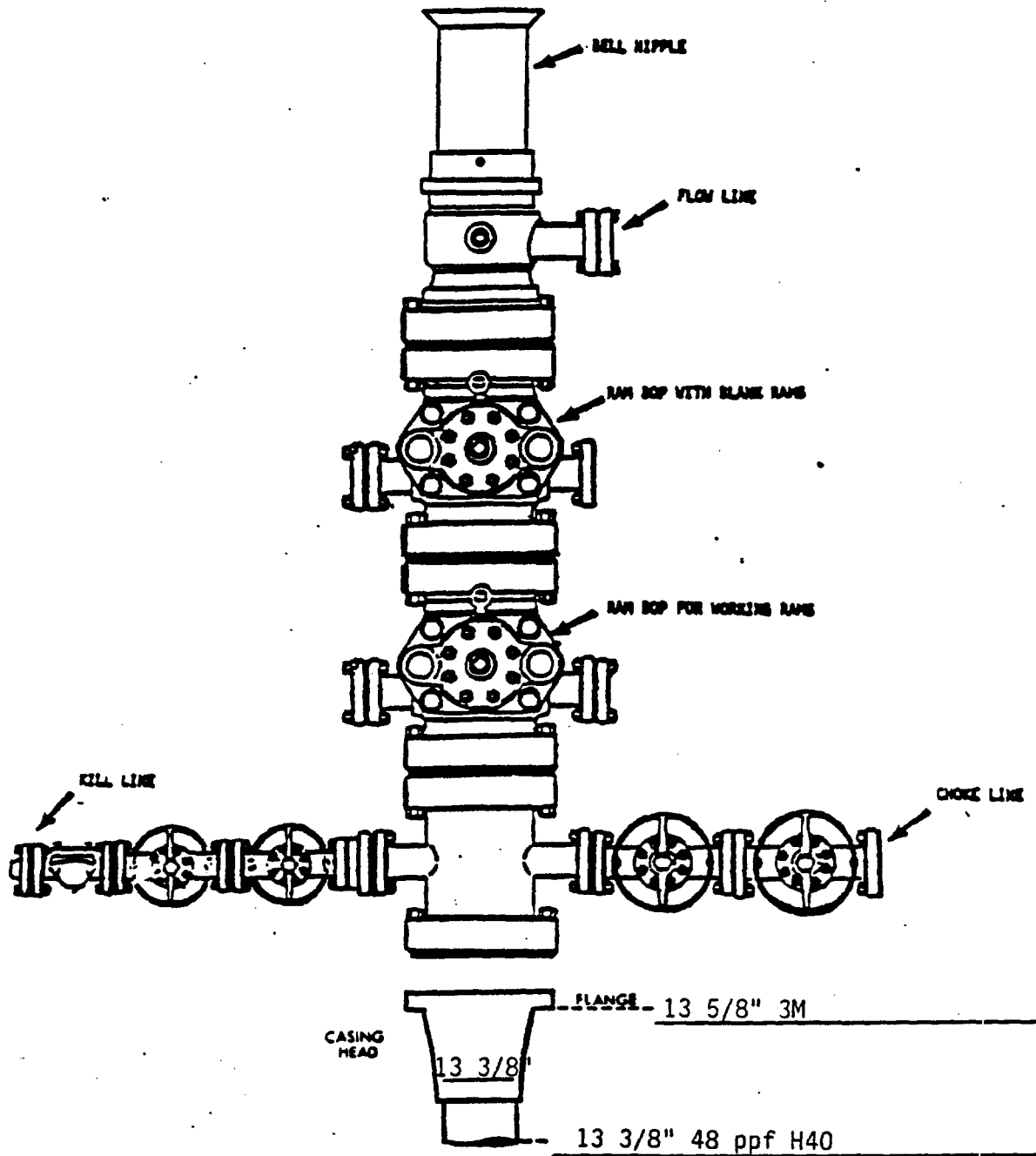
SIGNED Nancy Lewis TITLE Authorized Agent DATE 9-29-86

(This space for Federal or State office use)

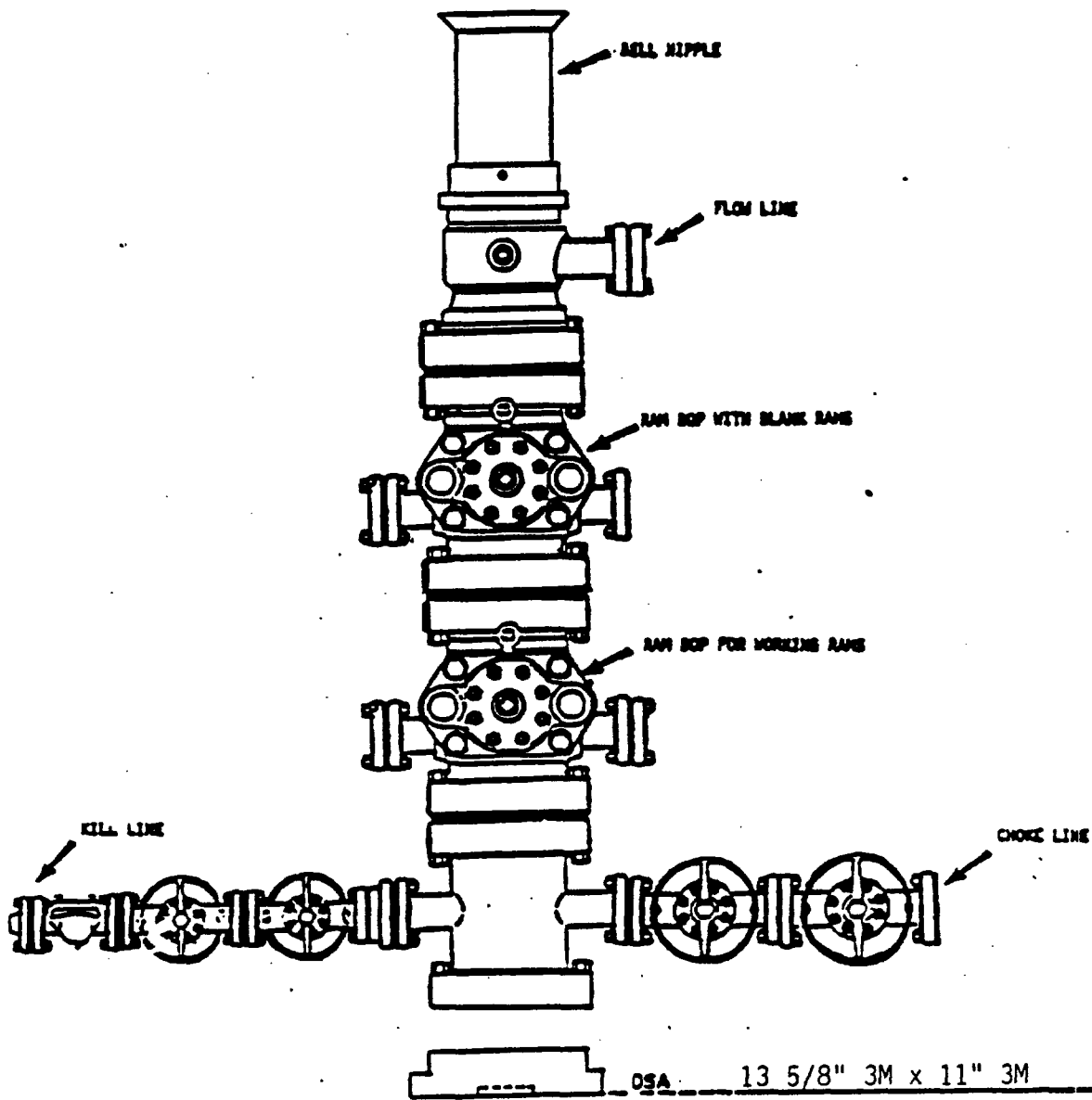
APPROVED BY _____ TITLE _____ ACCEPTED FOR RECORD

OCT 03 1986

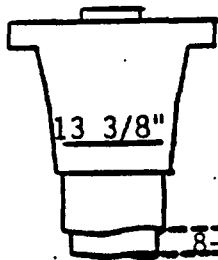
*See Instructions on Reverse Side



NOTE: ALL VALVES ARE METAL-TO-METAL SEAL AND FLANGED. ALL COMPONENTS MUST MEET ABOVE MINIMUM PRESSURE RATINGS. ALL COMPONENTS TO BE TESTED TO RATED PRESSURE AFTER ASSEMBLY AND BEFORE FURTHER COMBINE OPERATIONS MAY BE CONDUCTED.



CASING HEAD



FLANGE 13 5/8" 3M

13 3/8"

13 3/8" 48 ppf H40

8-5/8" 32 ppf K55

*NOTE: ALL VALVES ARE METAL-TO-METAL SEAL AND FLANGED. ALL COMPONENTS MUST MEET ABOVE MINIMUM PRESSURE RATINGS. ALL COMPONENTS TO BE TESTED TO RATED PRESSURE AFTER ASSEMBLY AND BEFORE FURTHER DOWNHOLE OPERATIONS MAY BE CONDUCTED.

**Mobil Producing
Texas & New Mexico Inc.**

MOBIL NO. 2 Government "k"
(LEASE)
Lea COUNTY, New Mexico STATE

Grade

Date
Drawn
Checked
Approved
Revised

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-102
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

Operator Mobil Producing Texas and New Mexico, Inc.		Lease GOVERNMENT "K"		Well No. 2
Unit Letter K	Section 23	Township 18 S.	Range 32 E.	County Lea
Actual Footage Location of Well: 1980 feet from the West line and 1950 feet from the South line				
Ground Level Elev. 3770'	Producing Formation Upper Bone Spring	Pool Querecho Plains	Dedicated Acreage: 40 Acres	

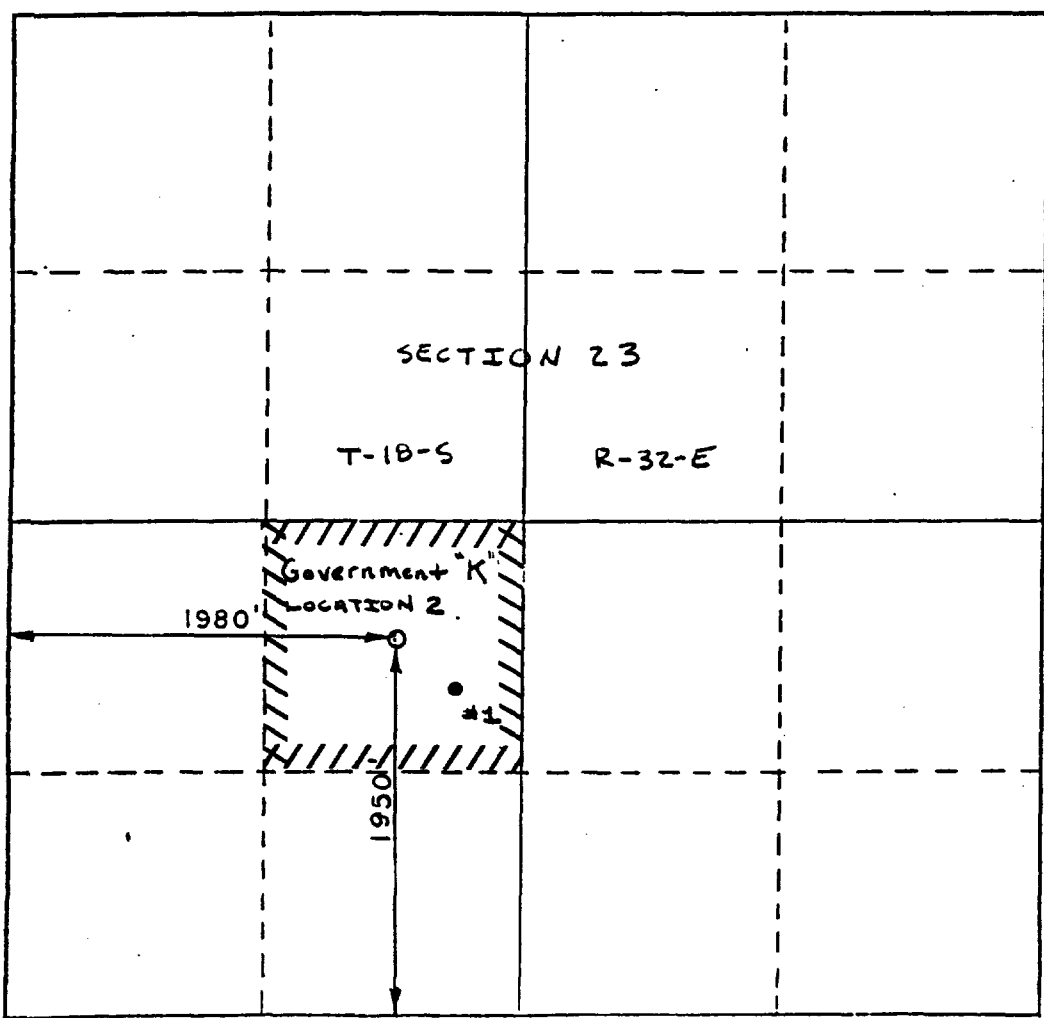
1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

RECEIVED
SEP -4 1986
ARTESIA, OFFICE

Yes No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.
<i>C.C. Smith, Jr.</i>
Name M. E. Sweeney
Position Env. & Reg. Manager
Company Mobil Producing TX & NM, Inc.
Date August 13, 1986
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.
Date Surveyed July 24, 1986
Registered Professional Engineer and/or Land Surveyor <i>[Signature]</i>
Certificate No. 51071

30-025-29749 ✓

NM OIL CONS. COMMISSION
Drewer DC
Artesia, NM 88210

Form 3160-3
(November 1983)
(formerly 9-331C)

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER
 SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
 Mobil Producing Texas & New Mex., Inc.

3. ADDRESS OF OPERATOR
 P. O. Box 633, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
 At surface
 1950' FSL & 1980' FWL, Sec. 23, T-18-S, R-32-E
 At proposed prod. zone
 same as surface

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 13 miles west of Buckeye, New Mexico

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 630'

16. NO. OF ACRES IN LEASE 40

17. NO. OF ACRES ASSIGNED TO THIS WELL 40

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. -

19. PROPOSED DEPTH 9,500'

20. ROTARY OR CABLE TOOLS Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.) 3770'

22. APPROX. DATE WORK WILL START* ASAP

5. LEASE DESIGNATION AND SERIAL NO.
 USA-NM-0554967

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
 Government "K"

9. WELL NO.
 2

10. FIELD AND POOL, OR WILDCAT
 Querecho Plains Upper Bone

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 Sec. 23, T-18-S, R-32-E Sprir

12. COUNTY OR PARISH
 Lea

13. STATE
 New Mexico

RECEIVED BY
SEP -4 1986
O. C. D.
ARTESIA, OFFICE

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	48#	700'	924 cu ft circulate to surface
12-1/4"	8-5/8"	32#	4800'	2640 cu ft circulate to surface
7-7/8"	5-1/2"	15.5#	9500'	2513 cu ft circulate to 4600'

CEMENTING PROGRAM

- 700 sx Class C + 2% CaCl₂
- 1700 sx Class C + 100 scf/bbl Nitrogen + 1.5% Foamer + .75% Foam Stabilizer, 300 sx Class C Neat
- 1400 sx TLW + 0.8% Fluid loss additive + 0.2% Retarder 300 sx Class n Neat

LOGGING PROGRAM

- CNL-LDT-GR-CAL 4800-Surf.
- DDL/DIL-MLL-GR CAL-TD-4800'
- BHC Sonic GR CACL -TD-4800'

MUD PROGRAM

Depth	Mud Type	Mud Weight	Viscosity	Water Loss	PH
0- 700'	FW-Spud	8.8- 9.4	32-40	NC	8.5-9.0
700-4800'	BW	9.8-10.4	32-40	NC	9.0-9.5
4800-8300'	FW	8.4- 8.8	30-36	NC	9.0-9.5
8300-9500'	FW-Gel	8.6- 9.2	32-40	+20	9.0-9.5

BLOWOUT PREVENTER PROGRAM

(See Attached)

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED C.C. Smith for M.E. Sweeney TITLE Env. & Reg. Manager DATE 8-13-86

(This space for Federal or State office use)

PERMIT NO. Orig: Sgd: Charles S. E APPROVAL DATE _____
 APPROVED BY Area Manager TITLE _____ DATE 9-3-86

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO GENERAL REQUIREMENTS AND SPECIAL STIPULATIONS

WRS COMPLETION REPORT

COMPLETIONS SEC 23 TWP 18S RGE 32E
 PI# 30-T-0003 12/18/86 30-025-29749-0000 PAGE 1

NMEX LEA * 1950FSL 1980FWL SEC NE SW
 STATE COUNTY FOOTAGE SPOT
 MOBIL PRODUCING TX & NM D DO
 OPERATOR WELL CLASS INIT FIN
 2 GOVERNMENT "K"
 WELL NO. LEASE NAME
 3782KB 3770GR QUERECHO PLAINS
 OPER ELEV FIELD POOL AREA
 API 30-025-29749-0000 •
 LEASE TYPE NO. PERMIT OR WELL I.D. NO.
 09/19/1986 11/24/1986 ROTARY OIL
 SPUD DATE COMP. DATE TYPE TOOL STATUS
 9500 BONE SPG MORANCO 10 RIG SUB 17
 PROJ. DEPTH PROJ. FORM CONTRACTOR
 DTD 8900 LTD 8901 PB 8856 FM/TD BONE SPG
 DRILLERS T.D. LOG T.D. PLUG BACK TD OLD T.D. FORM T.D.

LOCATION DESCRIPTION

8 MI SE MALJAMAR, NM

CASING/LINER DATA

CSG 13 3/8 @ 700 W/ 700 SACKS
 CSG 8 5/8 @ 4800 W/ 3100 SACKS
 LNR 5 1/2 4408- 8900 W/ 900S

TUBING DATA

TBG 2 7/8 AT 8556

INITIAL POTENTIAL

IPP 69BOPD 90 MCFD 24BW 24HRS
 BONE SPG PERF W/ 39/IT 8454- 8515 GROSS
 GTY 38.2 GOR 1304

TYPE	FORMATION	LTH	TOP DEPTH/SUB	BSE DEPTH/SUB
LOG	RUSTLER		1145 2637	
LOG	QUEEN		3902 -120	
LOG	SN ANDRS		4748 -966	
LOG	DELAWARE		5371 -1589	
LOG	BONE SPG		6835 -3053	

PRODUCTION TEST DATA

PTS 11BO 6HRS

CONTINUED IC# 300257025686

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 Prohibited



Petroleum Information
 CORPORATION

PI-WRS-GET
 Form No 187

COMPLETIONS SEC 23 TWP 18S RGE 32E
PI# 30-T-0003 12/18/86 30-025-29749-0000 PAGE 2

MOBIL PRODUCING TX & NM D DO
2 GOVERNMENT "K"

PRODUCTION TEST DATA

BONE SPG PERF JET W/ 1/FT 8454- 8515 GROSS
PERF 8454- 8456 8473- 8496 8499- 8501 8507- 8515
SWFR 8454- 8515 50000GALS 70000LBS SAND
MINI-MAX
SWBD 11 BO + 119 BLW IN 6 HRS

LOGS AND SURVEYS /INTERVAL,TYPE/

LOGS 4800- 8900 DILL 4800- 8900 MLL 4408- 8856 CBL
LOGS 4408- 8856 VD 4408- 8856 GR 4408- 8856 CCL
LOGS 4408- 8856 CET 4408- 8856 SPCT 4408- 8856 DENL
LOGS 8000- 8856 GR DSN GRDL

DRILLING PROGRESS DETAILS

MOBIL PRODUCING TX & NM
BOX 633
MIDLAND, TX 79702
915-684-8211
09/08 LOC/1986/
09/23 DRLG 1800
10/06 DRLG 8770
10/07 8900 TD, RNG LOGS
10/17 8900 TD, WOCT
10/22 8900 TD, WOCT
10/29 8900 TD, PB 8856, PREP TREAT
11/07 8900 TD, PB 8856, SWBG
TD REACHED 10/06/86 RIG REL 10/10/86
12/15 8900 TD, PB 8856
COMP 11/24/86, IPP 69 BO, 90 MCFG, 24 BWPD
GOR 1304, GTY 38.2
PROD ZONE - BONE SPRING 8454-8515
NO CORES OR DSTS RPTD

HINKLE, COX, EATON, COFFIELD & HENSLEY

LEWIS C. COX
PAUL W. EATON
CONRAD E. COFFIELD
HAROLD L. HENSELEY, JR.
STUART D. SHANOR
ERIC D. LANPHERE
C. D. MARTIN
PAUL J. KELLY, JR.
ROBERT P. TINNIN, JR.
MARSHALL G. MARTIN
OWEN M. LOPEZ
DOUGLAS L. LUNSFORD
JOHN J. KELLY
NICHOLAS J. NOEDING
T. CALDER EZZELL, JR.
WILLIAM B. BURFORD*
RICHARD E. OLSON
RICHARD R. WILFONG*
THOMAS J. McBRIDE
STEVEN D. ARNOLD
JAMES J. WECHSLER
NANCY S. CUSACK
JEFFREY L. FORNACIARI
JEFFREY D. HEWETT
JAMES BRUCE
JERRY F. SHACKELFORD*
JEFFREY W. HELLBERG*
ALBERT L. PITTS
THOMAS M. HNASKO
JOHN C. CHAMBERS*
GARY D. COMPTON*
MICHAEL A. GROSS
THOMAS D. HAINES, JR.
GREGORY J. NIBERT
DAVID T. MARKETTE*
MARK C. DOW

KAREN M. RICHARDSON*
FRID W. SCHWENDIMANN
JAMES M. HUDSON
JEFFREY S. BAIRD*
MACDONNELL GORDON
REBECCA NICHOLS JOHNSON
WILLIAM P. JOHNSON
STANLEY K. KOTOVSKY, JR.
H. R. THOMAS
KARA L. KELLOGG

BETTY H. LITTLE*
RUTH S. MUSGRAVE
ELLEN S. CASEY
S. BARRY PAISNER
MARGARET CARTER LUDEWIG
STEPHEN M. CRAMPTON
MARTIN MEYERS
GREGORY S. WHEELER
ANDREW J. CLOUTIER
JAMES A. GILLESPIE
GARY W. LARSON
STEPHANIE LANDRY
JOHN R. KULSETH, JR.
MARGARET R. MCNETT
BRIAN T. CARTWRIGHT*
LISA K. SMITH*
JAMES KENT SCHUSTER*
ROBERT H. BETHEA*
BRADLEY W. HOWARD
CHARLES A. SUTTON*
NORMAN D. EWART
DARREN T. GROCE*
MOLLY McINTOSH

ATTORNEYS AT LAW
218 MONTEZUMA
POST OFFICE BOX 2068
SANTA FE, NEW MEXICO 87504-2068
(505) 982-4554
FAX (505) 982-8623

CLARENCE E. HINKLE (1901-1985)
W. E. BONDURANT, JR. (1913-1973)
ROY C. SNODGRASS, JR. (1914-1987)

OF COUNSEL
O. M. CALHOUN*
MACK EASLEY
JOE W. WOOD
RICHARD S. MORRIS

WASHINGTON, D.C.
SPECIAL COUNSEL
ALAN J. STATMAN

700 UNITED BANK PLAZA
POST OFFICE BOX 10
ROSWELL, NEW MEXICO 88202
(505) 622-6510
FAX (505) 623-9332

2800 CLAYDESTA CENTER
6 DESTA DRIVE
POST OFFICE BOX 35810
MIDLAND, TEXAS 79702
(915) 683-4691
FAX (915) 683-6518

1700 TEAM BANK BUILDING
POST OFFICE BOX 9228
AMARILLO, TEXAS 79105
(806) 372-5569
FAX (806) 372-9761

500 MARQUETTE N.W., SUITE 800
POST OFFICE BOX 2043
ALBUQUERQUE, NEW MEXICO 87103
(505) 768-1500
FAX (505) 768-1529

June 15, 1992

Case 10497
RECEIVED
JUN 15 1992
OIL CONSERVATION DIVISION

*NOT LICENSED IN NEW MEXICO

VIA HAND DELIVERY

Ms. Florene Davidson
Oil Conservation Division
State Land Office Building
Santa Fe, New Mexico 87503

Dear Florene:

Enclosed are an original and one copy of an Application for Authorization to Inject, filed on behalf of Mewbourne Oil Company, regarding Mewbourne's Federal E No. 11 located in the NE $\frac{1}{4}$ NE $\frac{1}{4}$ of Section 27, Township 18 South, Range 32 East. This well is being converted to injection for purposes of a water flood pilot project. Please set this matter for the July 9, 1992 Examiner Hearing. Please call me if you need anything further on this matter. Thank you.

Very truly yours,

HINKLE, COX, EATON, COFFIELD
& HENSLEY

James Bruce
James Bruce

JB:frs
Enclosures

MEWBOURNE OIL COMPANY

P.O. BOX 7698
TYLER, TEXAS 75711
903 - 561-2900
FAX 903 - 561-1870
June 12, 1992

RECEIVED

JUN 15 1992

OIL CONSERVATION DIVISION

State of New Mexico
Oil Conservation Commission
P. O. Box 2088
Santa Fe, New Mexico 87504

Attention: Mr. David Catanach

Case 10497

Re: Application for Authorization
to Inject - Federal "E" No. 11
Unit A, Sec. 27, T18S-R32E
Lea County, New Mexico

Gentlemen:

Mewbourne Oil Company and the Operator's Committee of the proposed Querecho Plains Bone Spring Sand Unit recommends converting the captioned well to a pilot water injection well prior to the formation of the proposed unit.

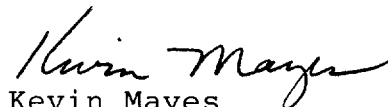
The original and one (1) copy of application Form C-108 and all appropriate supporting data are attached. A copy of similar information has been submitted to the BLM in Carlsbad.

This application cannot be administratively approved and it is requested that a hearing be set for July 9, 1992.

If further information is required, please advise.

Very truly yours,

MEWBOURNE OIL COMPANY



Kevin Mayes
Engineer

KM:gt
Enclosures

Copy to: Oil Conservation Division
Hobbs, New Mexico

Case 10497

APPLICATION FOR AUTHORIZATION TO INJECT

I. Purpose: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? yes no

II. Operator: Mewbourne Oil Company

Address: P. O. Box 7698, Tyler, Texas 75711

Contact party: Kevin Mayes/Ken Calvert Phone: (903) 561-2900

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: Kevin Mayes Title Engineer

Signature: *Kevin Mayes* Date: 6/12/92

* 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.

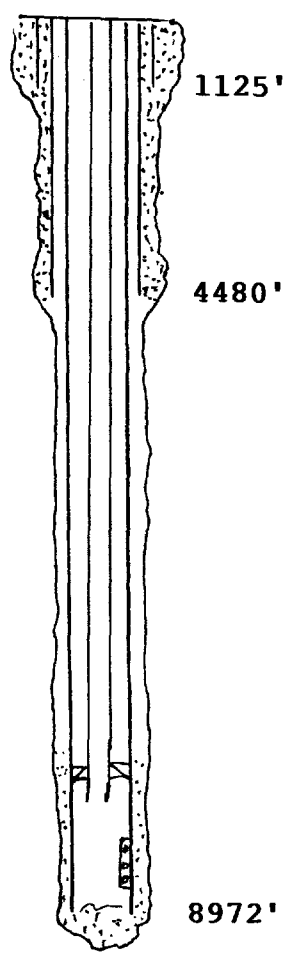
NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

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.

ITEM III OF NEW MEXICO OCD FORM C-108
INJECTION WELL DATA SHEET

Mewbourne Oil Company Federal "E"
OPERATOR LEASE
 11 660' FNL & 530' FEL of Sec. 27, 18S-32E
WELL NO. FOOTAGE LOCATION SECTION TOWNSHIP RANGE
 Lea County, New Mexico

Schematic



Tubular Data

Surface Casing
 Size 13-3/8 " Cemented with 475 sv.
 TOC _____ feet determined by _____
 Hole size _____

Intermediate Casing
 Size 8-5/8 " Cemented with 2600 sv.
 TOC _____ feet determined by _____
 Hole size _____

Long string
 Size 5-1/2 " Cemented with 1400 sv.
 TOC _____ feet determined by _____
 Hole size _____
 Total depth 8972'

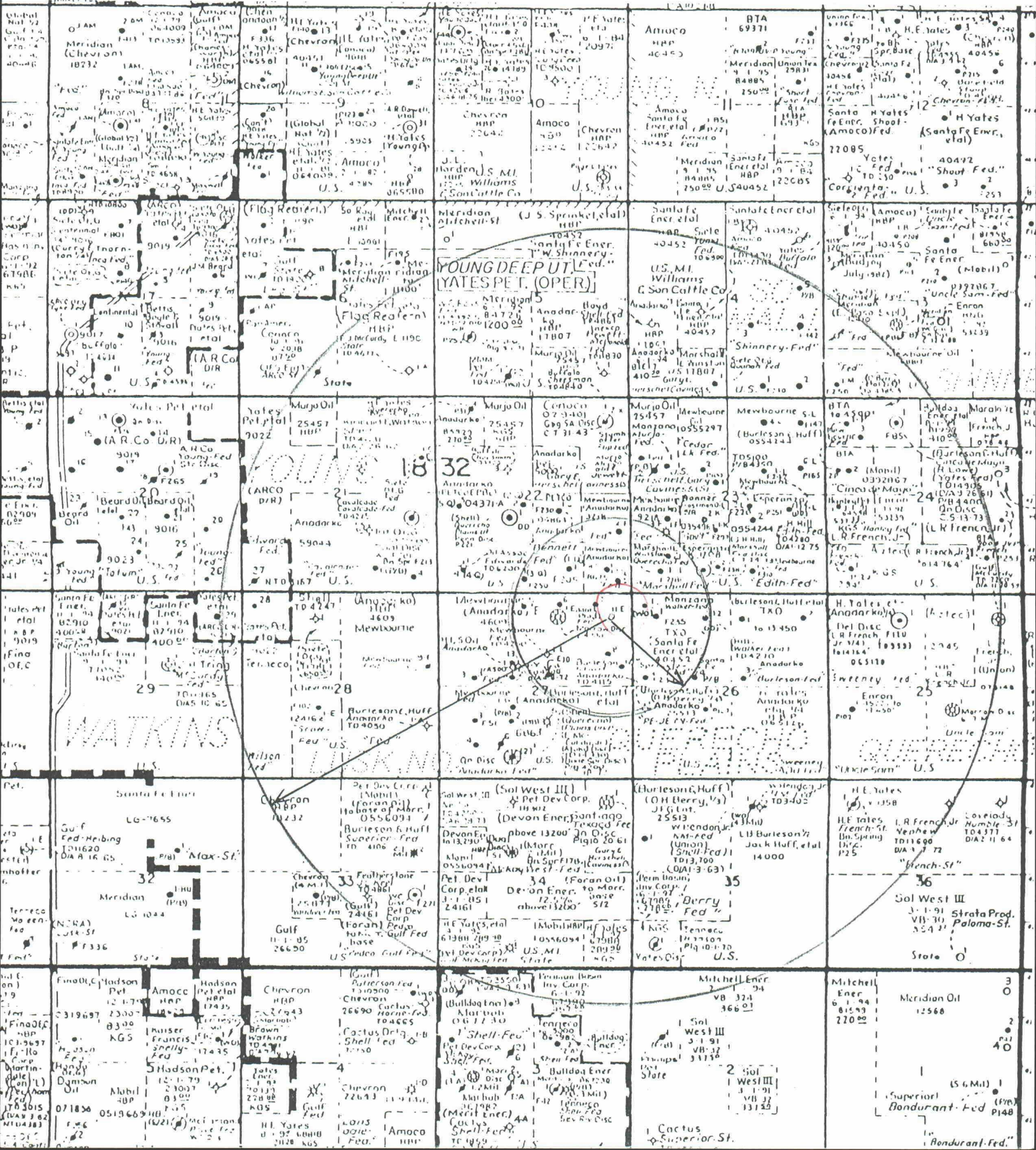
Injection interval
8360 feet to 8388 feet
(perforated or open-hole, indicate which)
 and 8450 feet to 8486 feet.

Tubing size 2-7/8" lined with bare steel set in a
(material)
Otis Permalach packer at 8370 feet
(brand and model)
 (or describe any other casing-tubing seal).

Other Data

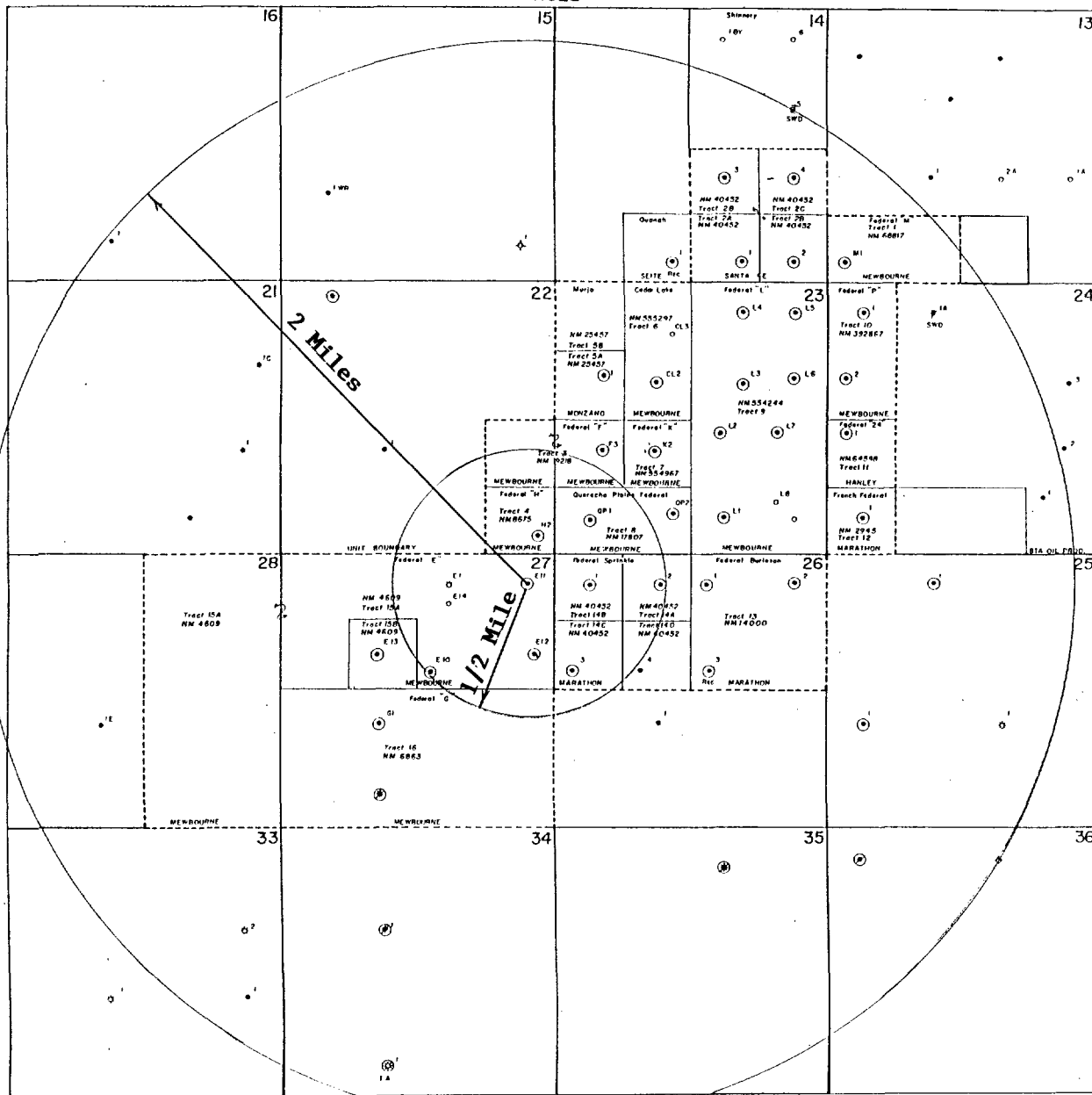
1. Name of the injection formation 1st Bone Spring Sand
2. Name of Field or Pool (if applicable) Querecho Plains
3. Is this a new well drilled for injection? Yes No
 If no, for what purpose was the well originally drilled? Oil Production
4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) Bone Spring Carbonate. 8826-70' (Non-productive). Isolated from above perms by CIBP at 8800'.
5. Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area.
Overlying - San Andres Top at 4836'
Underlying - Lower Bone Spring Top at 8660'

**ITEM V OF NEW MEXICO OCD FORM C-108
MAP OF ALL WELLS WITHIN 2 MILES OF INJECTOR
QUERECHO PLAINS FEDERAL "E" NO. 11**



R32E

T
1
8
S



0' 500' 1000' 2000' 3750'

MOC	MEWBOURNE OIL CO. TYLER, TEXAS
	QUERCHO PLAINS LEA COUNTY, NEW MEXICO
QUERCHO PLAINS BONE SPRING UNIT EXHIBIT "A" UNIT AGREEMENT	
Bone Spring Penetrations	
NM 9-91 CM R. 1-92	

ITEM VI OF NEW MEXICO FORM C-108
WELLS WITHIN REVIEW AREA WHICH PENETRATE THE 1ST ZONE SPRING SAND
QUERRECHO PLAINS FEDERAL E #11

OPERATOR	LEASE/WELL	LOCATION	TYPE	CONSTRUCTION	DATE DRILLED	TD	COMPLETION & COMMENTS
MEMBOURNE OIL CO.	FED H #2	T18S, R32E, SEC 22 330 FSL, 330 FEL	OIL	13 3/8 @ 440' CMT W/ 400 SX 8 5/8 @ 4472' CMT W/ 2100 SX 5 1/2 @ 8960' CMT W/ 1700 SX	2/18/86	8960'	OPEN PERFS 8396'-8460'
MEMBOURNE OIL CO.	FED F#3	T18S, R32E, SEC 23 1980 FSL, 990 FWL	OIL	13 3/8 @ 480' CMT W/ 275 SX 8 5/8 @ 4285' CMT W/ 1700 SX 5 1/2 @ 8570' CMT W/ 1375 SX	12/31/86	8570'	OPEN PERFS 8362'-8448'
MARSHALL & WINSTON INC.	QUERRECHO FED #1	T18S, R32E, SEC 23 610 FSL, 760 FWL	OIL	13 3/8 @ 354' CMT W/ 385 SX 8 5/8 @ 3047' CMT W/ 1475 SX 5 1/2 @ 8565' CMT W/ 1250 SX	12/31/85	9580'	OPEN PERFS 8414'-8447'
MARSHALL & WINSTON INC.	QUERRECHO FED #2	T18S, R32E, SEC 23 760 FSL, 2310 FWL	OIL	13 3/8 @ 374' CMT W/ 385 SX 8 5/8 @ 3010' CMT W/ 1300 SX 5 1/2 @ 8703' CMT W/ 1100 SX	5/6/86	9100'	OPEN PERFS 8459'-8526'
MARATHON	SPRINKLE FED #2	T18S, R32E, SEC 26 660 FNL, 1980 FNL	OIL	8 5/8 @ 547' CMT W/ 400 SX 5 1/2 @ 8711' CMT W/ 1950 SX	10/3/85	8711'	OPEN PERFS 8542'-8574'
MARATHON	SPRINKLE FED #1	T18S, R32E, SEC 26 660 FNL, 660 FNL	OIL	13 3/8 @ 536' CMT W/ 500 SX 8 5/8 @ 4814' CMT W/ 2825 SX 4 1/2 @ 10635' CMT W/ 735 SX	5/11/85	13350'	PERF & TEST 10196'-10350' PB 10175' PERF & TEST 8439'-8532' SDZ 8439'-8478' OPEN PERFS 8507'-8532'
MARATHON	SPRINKLE FED #3	T18S, R32E, SEC 26 2310 FNL, 330 FNL	OIL	11 3/4 @ 350' CMT W/ 485 SX 8 5/8 @ 2767' CMT W/ 1700 SX 5 1/2 @ 8710' CMT W/ 700 SX	3/9/86	8710'	OPEN PERFS 8502'-8568'
MARATHON	SPRINKLE FED #4	T18S, R32E, SEC 26 2310 FNL, 1650 FNL	OIL	13 3/8 @ 353' CMT W/ 370 SX 8 5/8 @ 2810' CMT W/ 1050 SX 5 1/2 @ 9700' CMT W/ 900 SX	1/28/87	9700'	OPEN PERFS 8823'-8836'
MEMBOURNE OIL CO.	FED E#1	T18S, R32E, SEC 27 660 FNL, 1980 FEL	OIL	13 3/8 @ 650' CMT W/ 650 SX 9 5/8 @ 4540' CMT W/ 2975 SX 5 1/2 @ 12898' CMT W/ 550 SX	10/31/76	12898'	OPEN PERFS 12625'-12791'
MEMBOURNE OIL CO.	FED E#13	T18S, R32E, SEC 27 1980 FNL, 1980 FNL	OIL	13 3/8 @ 460' CMT W/ 485 SX 8 5/8 @ 4248' CMT W/ 1500 SX 5 1/2 @ 9020' CMT W/ 1225 SX	8/12/87	9020'	OPEN PERFS 8504'-8534'
MEMBOURNE OIL CO.	FED E#10	T18S, R32E, SEC 27 2310 FNL, 2310 FEL	OIL	13 3/8 @ 456' CMT W/ 475 SX 8 5/8 @ 4542' CMT W/ 2600 SX 5 1/2 @ 9020' CMT W/ 1400 SX	5/14/85	9020'	OPEN PERFS 8501'-8550'
MEMBOURNE OIL CO.	FED E#12	T18S, R32E, SEC 27 1980 FNL, 330 FEL	OIL	13 3/8 @ 440' CMT W/ 450 SX 8 5/8 @ 4310' CMT W/ 1800 SX 5 1/2 @ 9052' CMT W/ 835 SX	3/16/86	9050'	OPEN PERFS 8470'-8522'

ITEM VII OF NEW MEXICO OCD FORM C-108
DATA ON PROPOSED OPERATIONS
QUERECHO PLAINS FEDERAL E #11
5-12-92/KMM

- ITEM VII (1) Proposed maximum injection rate is 800 bwpd/injector.
- ITEM VII (2) The injection system will be operated as a closed system.
- ITEM VII (3) The injection pressure will be held to a maximum of 1700 psi (0.2 psi/ft * 8501'). If no detriment is seen from this pressure then administrative approval may be requested for higher pressures.
- ITEM VII (4) The source of injection water will be produced water from the Bone Spring, Delaware and/or Queen formations. If additional water is required the city of Carlsbad will be approached for a tap on their Caprock system. A copy of the water analyzes is attached.
- ITEM VII (5) Not applicable.

ITEM VIII OF NEW MEXICO OCD FORM C-108
GEOLOGIC DATA ON THE INJECTION ZONE & UNDERGROUND DRINKING WATER
QUERECHO PLAINS FEDERAL E #11
5-12-92/KMM

The zone being targeted for water injection at Querecho Plains is the First Bone Spring sand at depths from 8430'-8528' in the well Federal L NO. 4, Section 23, T18S, R32E. The First Bone Spring sands are a sequence of well consolidated sandstone, siltstone, and shale strata, with localized carbonate deposition, of Permian age cemented with calcareous material. An eight percent porosity cut off is use to determine net pay as porosity less than eight percent is considered impermeable at the existing and proposed reservoir pressure and reservoir fluid regimes. Net pay isopach maps contained in the engineering report portion of the unit plan show the areal extent of the targeted sands. Impermeable carbonate deposits exist above and below the targeted sands thus defining the permeable limits of the reservoir. All injected fluids should remain in the reservoir with the exception of cycling to the surface through wellbores.

Based on communications with the New Mexico State Engineer's Roswell office (Ken Fresquez) and OCD files at Hobbs there appears to be only one fresh water well within T18S & R32E. This well's total depth was 270' and is located in the NW, NW, SE, SE, NW of section 20 (3 miles away from the nearest proposed injector). The source strata tapped by this well is the Triassic "Red Beds" and the only other strata Mr. Fresquez referred to as potentially fresh was the Alluvium which is shallower than the "Red Beds". There are no known fresh water strata underlying the Bone Spring.

ITEMS IX THROUGH XII
QUERECHO PLAINS FEDERAL E #11
5-12-92/KMM

- ITEM IX. Federal E #11 has an existing fracture stimulation and it is assumed that the well will be treated with acid at least once during the life of injection.
- ITEM X. All logging and test data for the existing wellbores already exists on file with the state of New Mexico Oil Conservation Division (OCD) and will not be resubmitted with this application.
- ITEM XI. As stated in ITEM VIII, it appears the only strata within one mile of our proposed unit which contains water of possible drinking quality is confined to 270' and shallower. No contamination of this drinking water should occur as all existing wellbores which penetrate the Bone Spring in the proposed area have surface casing set at a minimum depth of 350' with cement completely circulated behind this casing from setting depth to surface. In addition and to the best of my knowledge there are no fresh water wells within one mile of this proposed injector.
- ITEM XII. After reviewing the geology of the Bone Spring Sand strata in a one and one-half mile radius around the proposed unit area, no evidence appears of fractures or any hydrologic connection between the target sands and any overlying or underlying strata.

MEWBOURNE OIL COMPANY
APPLICATION FOR AUTHORIZATION TO INJECT
FEDERAL "E" NO. 11
LEA COUNTY, NEW MEXICO

CERTIFICATE OF SERVICE

I, Kevin Mayes, Engineer, Mewbourne Oil Company, Operator of the Federal "E" No. 11, have on this 12th day of June, 1992, mailed or caused to be mailed, postage prepaid a copy of the Application for Authorization to Inject to the following persons at the address shown:

LAND OWNER

Bureau of Land Management
P. O. Box 1397
Roswell, New Mexico 88220

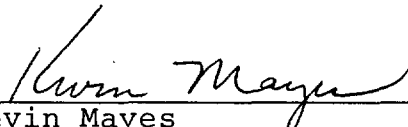
OFFSET OPERATORS

Tony Meyer
Anadarko Petroleum Corporation
400 West Illinois, Suite 1300
Midland, Texas 79701

Tom Westling
Marathon Oil Company
P. O. Box 552
Midland, Texas 79702

Gene H. Davis
Santa Fe Energy Resources, Inc.
550 W. Texas, Suite 1330
Midland, Texas 79701

James Guy
JFG Enterprises
P. O. Box 100
Artesia, New Mexico 88210

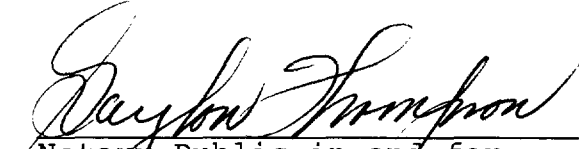


Kevin Mayes
Engineer

Subscribed in my presence and duly sworn to before me on this 12th day of June 1992.



GAYLON THOMPSON
Notary Public, State of Texas
My Comm. Expires 4/30/98



Notary Public in and for
Smith County, Texas

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL BOARD
RECEIVED

'92 APR 7 AM 10 12

FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

Operator **MEWBOURNE OIL COMPANY**

Address **P. O. BOX 7698, TYLER, TEXAS 75711**

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	Dry Gas <input type="checkbox"/>
			Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name	FEDERAL "E"	Well No.	10	Pool Name, including Formation	Querecho-Plains - R-8029	Kind of Lease	Federal	Lease No.	NM-46
Location	Upper Bone Springs 9/85								
Unit Letter	G	: 2310 Feet From The North Line and 2310 Feet From The East							
Line of Section	27	Township	18S	Range	32E	NMPM,	LEA	County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent)	P. O. Box 791, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/>	Phillips Petroleum Company, GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent)	P. O. Box 791, Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Unit G Sec. 27 Twp. 18S Rge. 32E	Is gas actually connected?	Yes

If this production is commingled with that from any other lease or pool, give commingling order number: _____

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	5/14/85	Date Compl. Ready to Prod.	7/14/85	Total Depth	9020'	P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	3735' GL, 3750' KB	Name of Producing Formation	Upper Bone Springs	Top Oil/Gas Pay	8501'	Tubing Depth	8498'	
Perforations	8501-8530'	Depth Casing Shoe						

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	456'	475
11"	8-5/8"	4542'	2600
7-7/8"	5-1/2"	9020'	1400

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	7/15/85	Date of Test	7/16/85	Producing Method (Flow, pump, gas lift, etc.)	Pump
Length of Test	24 hours	Tubing Pressure	--	Casing Pressure	--
Actual Prod. During Test		Oil - Bbls.	100	Water - Bbls.	50
				Gas - MCF	60

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Raymond Simpson
(Signature)
EXPLORATION SECRETARY
(Title)
JULY 17, 1985
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 19 1985**

BY **JERRY SEXTON**
DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
 Budget Bureau No. 1004-0137
 Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESRV. Other _____

2. NAME OF OPERATOR
 Mewbourne Oil Company

3. ADDRESS OF OPERATOR
 P. O. Box 7698, Tyler, Texas 75711

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
 At surface 2310' FNL and 2310' FEL
 At top prod. interval reported below Same
 At total depth Same

5. LEASE DESIGNATION AND SERIAL NO.
 NM-4609

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
 FEDERAL "E"

9. WELL NO.
 10

10. FIELD AND POOL, OR WILDCAT
 Querecho Plains-Upper Bone Springs

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
 27-T18S-R32E

12. COUNTY OR PARISH
 Lea

13. STATE
 New Mexico

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUDDED 5/14/85 16. DATE T.D. REACHED 6/12/85 17. DATE COMPL. (Ready to prod.) 7/14/85 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3735'GL, 3749.6'KB, 3748'DF 19. ELEV. CASINGHEAD

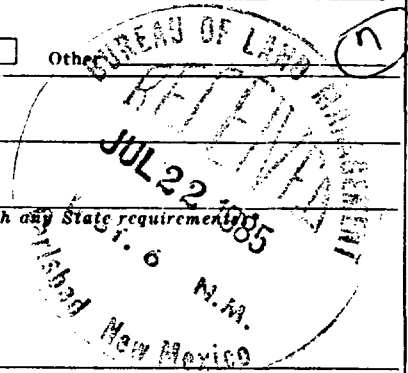
20. TOTAL DEPTH, MD & TVD 9020' 21. PLUG, BACK T.D., MD & TVD _____ 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS X CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
 Upper Bone Springs - 8501-8530'

25. WAS DIRECTIONAL SURVEY MADE
 Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN
 CDL, CDDSNL, Micro-Guard

27. WAS WELL CORED
 No



28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54.5#	456'		475 sxs Class "C"	None
8-5/8"	32# & 24#	4542'		2600 sxs lite & Class "C"	None
5-1/2"	17#	9020'		1400 sxs Class "H" & PCL	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	8498'	

31. PERFORATION RECORD (Interval, size and number)
 8501-8530'

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8502-8530'	5000 gals 15% NEFF acid 42,000 gals Pure Gel w/29,400# 20/40 sand + 67,000# 10/20 Sand.

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
7/15/85	Pumping	Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7/16/85	24 hrs	--	→	100	60	50	600:1

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	RECORD NO.	OIL GRAVITY-API (CORR.)
--	--	→	100	60	50	41° @ 74°

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
 Vented

TEST WITNESSED BY
 W. H. Cravey

35. LIST OF ATTACHMENTS
 Logs

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Thyler Thompson TITLE Exploration Secretary DATE 7/17/85

*(See Instructions and Spaces for Additional Data on Reverse Side)

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP VERT. DEPTH
Upper Queen	3911	3960	Sandstone, clear, red, transparent, very fine to fine grained, unconsolidated, well rounded. Fair sorting, some frosted, some subrounded. Few small clusters of clear sand w/bright yellow pinpoint fluorescence. Zone drilled at 2-3 mins/ft. Log porosities range 2-14% w/wtr sat calc from 33-45%.	Base of Salt Yates Queen Penrose San Andres Bone Springs Lower Bone Spgs.	2520' 2698' 3911' 4152' 4836' 7009' 8660'	
Penrose	4152	4178	Sandstone: gray, clear, very fine grained, consolidated, tight, calcareous matrix, subangular, fair sorting, no visual show. Zone drilled 1-4 mins/ft. Log porosities just reach 8% in two thin spikes. Avg porosity 4-5%. Calc wt sat 34-72%.			
Bone Springs	8500	8530	Sandstone: clear, very fine-fine grained, consolidated, friable, fair sorting, 80% w/blue-white fluorescence, mostly pinpoint & intergranular, fair bluewhite cut, good blue-white residual ring. Zone drilled 1.5-3.5 mins/ft. Crossplot porosities range 9-17% w/wtr sat calc 23-40%. Acoustic porosities 1-2% lower than crossplot porosities.			

38. GEOLOGIC MARKERS

RECEIVED
JUL 25 1985
G.D.P.
HORN BRIDGE

**RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION**

Form W-12
(1-1-71)

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)		6. RRC District
		7. RRC Lease Number. (Oil completions only)
1. FIELD NAME (as per RRC Records or Wildcat)	2. LEASE NAME FEDERAL "E"	8. Well Number #10
3. OPERATOR MEWBOURNE OIL		9. RRC Identification Number (Gas completions only)
4. ADDRESS P.O. BOX 5270 HOBBS, NEW MEXICO 88241		10. County LEA, N.MEX.
5. LOCATION (Section, Block, and Survey) SEC. 27, T-18-S., R-32-E		

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
486	486	3/4	1.31	6.36	6.36
984	498	1/2	0.44	2.19	8.55
1426	442	1/2	0.87	3.84	12.39
1925	499	3/4	1.31	6.53	18.92
2145	220	1 1/2	2.18	4.79	23.71
2616	471	1 1/2	2.62	12.34	36.05
2735	119	1 1/2	2.62	3.11	39.16
2904	169	1 3/4	3.05	5.15	44.31
3372	468	1 1/2	2.18	10.20	54.51
3780	408	1	1.75	7.14	61.65
4201	421	1/2	0.87	3.66	65.31
4423	222	1/2	0.44	9.76	75.07
4893	470	1/2	0.44	2.06	77.13
5369	476	1/2	0.44	2.09	79.22
5859	490	1	1.75	8.57	87.79
6335	476	1 1/2	2.62	12.47	100.26

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? yes no
18. Accumulative total displacement of well bore at total depth of 9020 feet = 194.71 feet.
- *19. Inclination measurements were made in - Tubing Casing Open hole Drill Pipe
20. Distance from surface location of well to the nearest lease line _____ feet.
21. Minimum distance to lease line as prescribed by field rules _____ feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? _____
- (If the answer to the above question is "yes", attach written explanation of the circumstances.)

<p>INCLINATION DATA CERTIFICATION</p> <p>I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.</p> <p><i>Larry V. Bohannon</i> Signature of Authorized Representative</p> <p>LARRY V. BOHANNON-VICE PRESIDENT Name of Person and Title (type or print)</p> <p>TAHOE DRILLING COMPANY Name of Company</p> <p>Telephone: <u>915</u> <u>697-4173</u> Area Code</p>	<p>OPERATOR CERTIFICATION</p> <p>I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.</p> <p><i>M.R. Vasicek</i> Signature of Authorized Representative</p> <p>M.R. Vasicek - Drlg. Engineer Name of Person and Title (type or print)</p> <p>Mewbourne Oil Company Operator</p> <p>Telephone: <u>505</u> <u>393-5905</u> Area Code</p>
--	--

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.

SHIPPED JUN 17 1985

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424.

Form 9-331 (May 1963)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL [X] GAS WELL [] OTHER []
2. NAME OF OPERATOR Mewbourne Oil Company
3. ADDRESS OF OPERATOR P. O. Box 7698, Tyler, Texas 75711
4. LOCATION OF WELL 2310' FNL and 2310' FEL
5. LEASE DESIGNATION AND SERIAL NO. NM-4609
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Federal "E"
9. WELL NO. 10
10. FIELD AND POOL, OR WILDCAT Querecho Plains-Lower Bone Springs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-T18S-R32E
12. COUNTY OR PARISH Lea
13. STATE N.M.
14. PERMIT NO.
15. ELEVATIONS 3734.9' GL

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF [] PULL OR ALTER CASING [] WATER SHUT-OFF [] REPAIRING WELL []
FRACTURE TREAT [] MULTIPLE COMPLETE [] FRACTURE TREATMENT [X] ALTERING CASING []
SHOOT OR ACIDIZE [] ABANDON* [] SHOOTING OR ACIDIZING [X] ABANDONMENT* []
REPAIR WELL [] CHANGE PLANS [] (Other) []
(Other) [] (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

6/29/85 - Welex perforated Bone Springs 8501-8530' - 1 SPF for 30 holes. Halliburton acidized with 5000 gals 15% NE-FE acid. Ran 60 RCNB. Average rate 4 BPM at 2400#. Increased to 4.9 BPM at 2600-2900#. Did not ball out. ISDP 1900#, in 5 mins 1400#, in 10 mins 1000#, in 15 mins 700#.

7/02/85 - Halliburton fracture treated Bone Springs 8501-30' with 42,000 gallons Pure Gel (30#) with 29,400# 20/40 sand + 67,000# 10/20 sand. ISIP 2310#, in 5 mins 2230#, in 10 mins 2180#, in 15 mins 2120#.

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Exploration Secretary DATE 7/02/85
(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

JUL 8 1985

*See Instructions on Reverse Side

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
 (Other instructions on re-
 verse side)

Form approved.
 Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
 NM-4609

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
 Federal "E"

9. WELL NO.
 10

10. FIELD AND POOL, OR WILDCAT
 Querecho Plains - Lowe
 Bone Springs

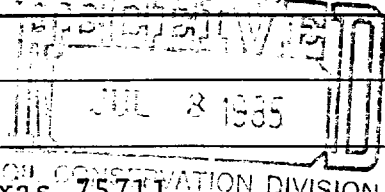
11. SEC., T., R., M., OR B.L.K. AND
 SURVEY OR AREA
 27-T18S-R32E

12. COUNTY OR PARISH
 Lea

13. STATE
 N.M.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
 Use "APPLICATION FOR PERMIT" for such proposals.)



1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
 Mewbourne Oil Company

3. ADDRESS OF OPERATOR
 P. O. Box 7698, Tyler, Texas 75711

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
 See also space 17 below.)
 At surface
 2310' FNL and 2310' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
 3734.9' GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Cementing Production String</u> <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

6/12/85 - Ran 248 joints 5-1/2" 17# N-80 LT&C Casing set at 9020'.
 DV tool at 7327'. Western cemented 1st stage with 450 sacks class "H"
 with .8% CF-1, .3% TF4. Displaced with 50 bbls FW + 160 bbls mud.
 Circulated 100 sacks to pit. 2nd stage cemented with 950 sacks PCL
 with 1/4# Celloseal, .6% CF-1, .2% TF-4 + 300 sacks .6% CF-1. Displaced
 with 170 bbls FW. PD at 5:30. Circulated 50 sacks of cement on 2nd stage.

18. I hereby certify that the foregoing is true and correct.
 SIGNED Gaylon Thompson TITLE Exploration Secretary DATE June 12, 1985

(This space for Federal or State office use)
 ACCEPTED FOR RECORD
 APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

JUL 1 1985

*See Instructions on Reverse Side

SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and
Effective 1-1-65

Operator **MEWBOURNE OIL COMPANY**

Address **P. O. BOX 7698, TYLER, TEXAS 75711**

Reason(s) for filing (Check proper box)

New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
		Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

THIS WELL HAS BEEN PLACED IN THE POOL
DESCRIBED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

DESCRIPTION OF WELL AND LEASE

Lease Name FEDERAL "E"	Well No. 10	Pool Name, Including Formation Quebracho-Plains - Upper Bone Springs	Kind of Lease State, Federal or Fee Federal	Lease No. NM-4609
Location				
Unit Letter G	: 2310 Feet From The North Line and	2310 Feet From The East		
Line of Section 27	Township 18S	Range 32E	NMPM, LEA	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	P.O. Box 791, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	P.O. Box 791, Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	G 27 18S 32E Yes

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/14/85	Date Compl. Ready to Prod. 7/14/85	Total Depth 9020'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3735' GL, 3750' KB	Name of Producing Formation Upper Bone Springs	Top Oil/Gas Pay 8501'	Tubing Depth 8498'					
Perforations 8501-8530'	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	456'	475
11"	8-5/8"	4542'	2600
7-7/8"	5-1/2"	9020'	1400

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 7/15/85	Date of Test 7/16/85	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test	Oil - Bbls. 100	Water - Bbls. 50	Gas - MCF 60

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Raymond Thompson
(Signature)
EXPLORATION SECRETARY
(Title)
JULY 17, 1985
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 19 1985**, 19____

BY *Jerry [Signature]*

TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM-4609

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal "E"

9. WELL NO.
10

10. FIELD AND POOL, OR WILDCAT
Querecho Plains-Lower Bone Springs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
27-T18S-R32E

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Mewbourne Oil Company

3. ADDRESS OF OPERATOR
P. O. Box 7698, Tyler, Texas 75711

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
2310' FNL and 2310' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3734.9' GL

12. COUNTY OR PARISH
Lea

13. STATE
N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) Cementing Intermediate String

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

5/25/85 - Ran 110 joints of 8-5/8", 32# & 24# J-55 ST&C Casing set at 4542' cemented with 2400 sacks of Pacesetter lite with 3# Hi-Seal + 5# salt and 200 sacks of Class "C". PD to 4500' at 5:00 A.M. Circulated 53 sacks.



18. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Exploration Secretary DATE May 31, 1985

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

JUL 1 1985

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-4609

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR HORBS, NEW MEXICO 88240

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal "E"

3. ADDRESS OF OPERATOR

9. WELL NO.

10

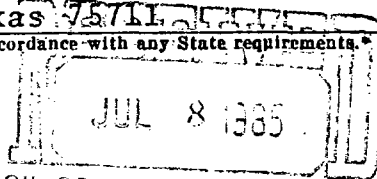
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT
Querecho Plains-Lower
Bone Springs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

27-T18S-R32E

2310' FNL and 2310' FEL



14. PERMIT NO.

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

3734.9' GL

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Cementing Surface Casing

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Spud 7:30 P.M. 5/14/85.

5/15/85 - Ran 13-3/8" 54.50# ST&C Casing (436') set at 456' with 475 sacks Class "C" with 2% CaCl + 1/4# Flocele. 1/4D to 425' at 6:15 A.M. Circulated 114 sacks to surface.



18. I hereby certify that the foregoing is true and correct

SIGNED

Rayson Simpson

TITLE

Exploration Secretary

DATE

5/20/85

(This space for Federal or State office use)

APPROVED BY

ACCEPTED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 1 1985

*See Instructions on Reverse Side

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

50-000-24225

NEW MEXICO COMMISSION BOX 1980 HOBBS, NEW MEXICO

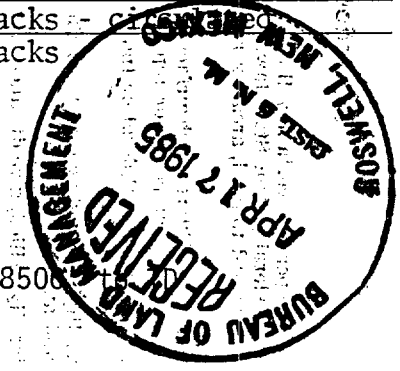
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK: DRILL [X], DEEPEN [], PLUG BACK []
b. TYPE OF WELL: OIL WELL [X], GAS WELL [], OTHER [], SINGLE ZONE [X], MULTIPLE ZONE []
2. NAME OF OPERATOR: Mewbourne Oil Company
3. ADDRESS OF OPERATOR: P. O. Box 7698, Tyler, Texas 75711
4. LOCATION OF WELL: 2310' FNL and 2310' FEL
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*: 11-1/2 miles North to Maljamar
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. line, if any): 2310'
16. NO. OF ACRES IN LEASE: 640
17. NO. OF ACRES ASSIGNED TO THIS WELL: 40
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.: 1740'
19. PROPOSED DEPTH: 9200'
20. ROTARY OR CABLE TOOLS: Rotary
21. ELEVATIONS (Show whether DF, RT, GR, etc.): 3734.9' GL
22. APPROX. DATE WORK WILL START*: Immediately

5. LEASE DESIGNATION AND SERIAL NO.: NM-4609
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME: Federal "E"
9. WELL NO.: 10
10. BRAND AND MODEL OR W.P.L.O.F.T.C. (Attached) Knaiss I-LI Bone Springs
11. SEC., T., R., M., OR B.L.K. AND SURVEY OR AREA: 27-T18S-R32E
12. COUNTY OR PARISH: Lea
13. STATE: N.M.

23. PROPOSED CASING AND CEMENTING PROGRAM
Table with columns: SIZE OF HOLE, SIZE OF CASING, WEIGHT PER FOOT, SETTING DEPTH, QUANTITY OF CEMENT.
Rows: 17-1/2" (13-3/8" casing, 54# weight, 450' depth, 650 sacks), 11" (8-5/8" casing, 24# & 32# weight, 4500' depth, 600 sacks), 7-7/8" (5-1/2" casing, 17# weight, 9200' depth, 800 sacks)

Hydril 900 Series and Shaffer Model 39-3000 Hydraulic Blowout Preventer
Mud Program: Fresh water to 450' P.R., Drill with brine water to 8500'. Salt mud from 8500' to 9200'. Flush with mud for logging



IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED: [Signature] TITLE: Exploration Secretary DATE: April 11, 1985

(This space for Federal or State office use)

PERMIT NO.: Orig: Sgd. Charles S. Deffen APPROVAL DATE:
APPROVED BY: Area Manager TITLE: DATE: 5-6-85
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

APPROVAL SUBJECT TO GENERAL REQUIREMENTS AND SPECIAL STIPULATIONS ATTACHED

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

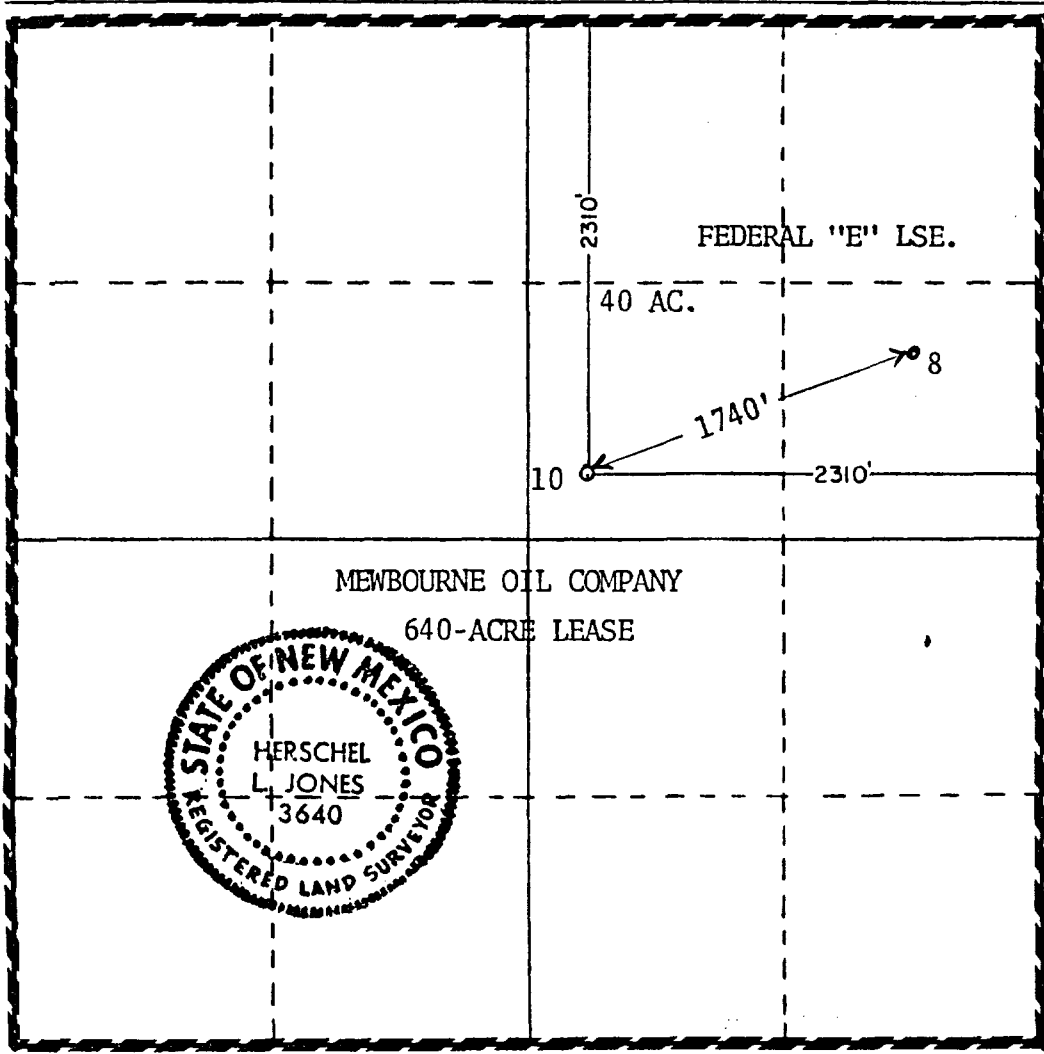
Operator MEWBOURNE OIL COMPANY		Lease Federal E		Well No. 10
Unit Letter G	Section 27	Township 18 South	Range 32 East	County Lea
Actual Footage Location of Well: 2310 feet from the North line and 2310 feet from the East line				
Ground Level Elev. 3734.9'	Producing Formation Bone Springs	Pool Querecho Plains-Lower Bone Springs	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

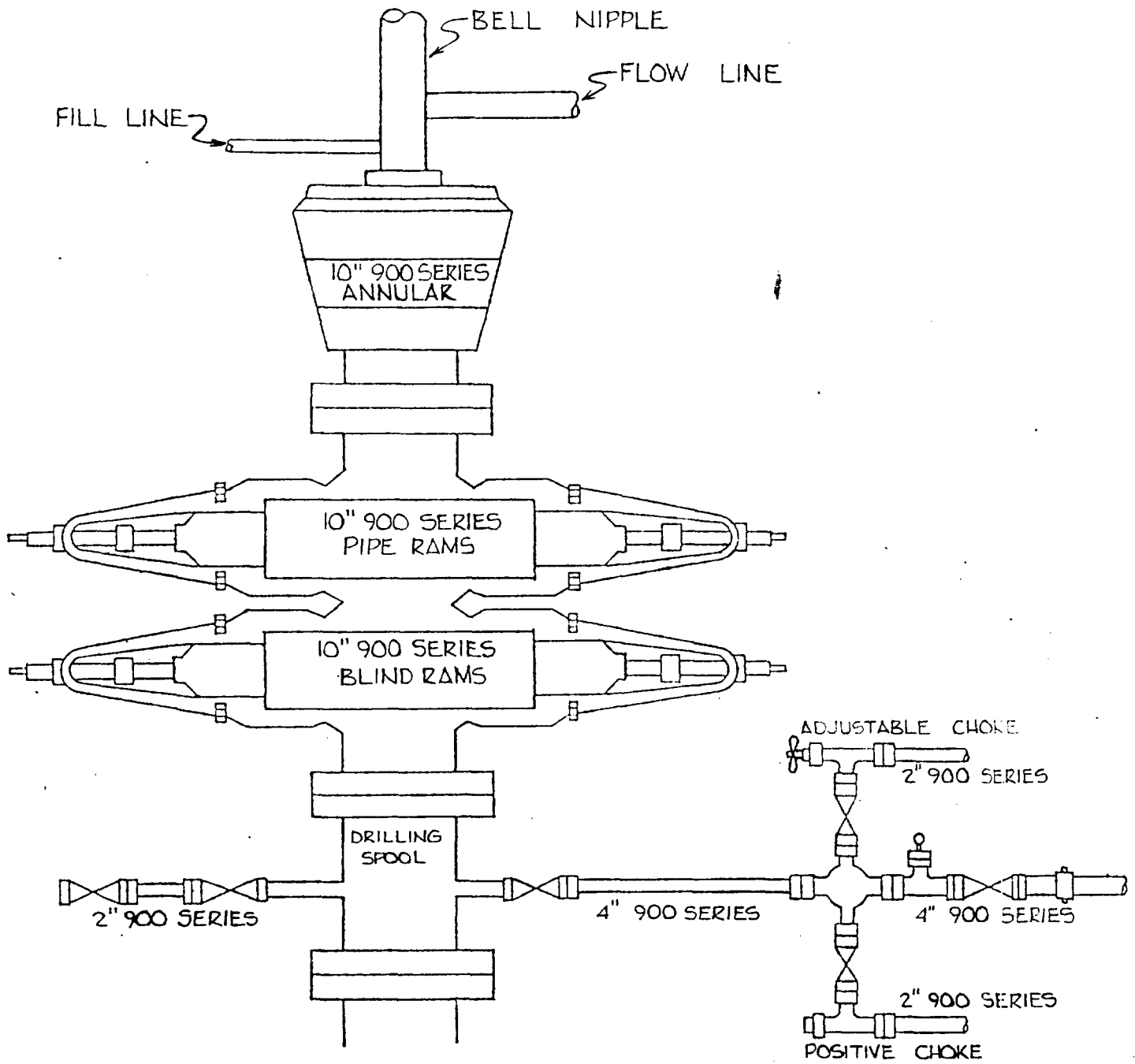
Yes No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
<i>Gaylon Thompson</i>	
Name	Gaylon Thompson
Position	Exploration Secretary
Company	Mewbourne Oil Company
Date	April 11, 1985
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.	
Date Surveyed	3/8/85
Registered Professional Engineer and/or Land Surveyor	
<i>Herschel L. Jones</i>	
Certificate No.	3640



LEA
MEWBOURNE OIL

Querecho Plains
10 Federal "E"
Sec 27, T18S, R32E

NM
Page #2

7-29-85 Continued

*Denotes changes & additions

8-3-85 COMPLETION ISSUED
9-21-85 RE-ISSUED COMPLETION

8-1-41 NM
IC 30-025-70214-85



Petroleum Information RE-ISSUED COMPLETION

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COUNTY LEA FIELD Querecho Plains STATE NM

OPR MEWBOURNE OIL API 30-025-29252

NO 10 LEASE Federal "E" MAP

Sec 27, T18S, R32E CO-ORD

2310 FNL, 2310 FEL of Sec 8-1-41 NM

15 mi SW/Buckeye SPD 5-14-85 CMP 7-16-85

CSG	WELL CLASS: INIT D FIN DO LSE. CODE			
	FORMATION	DATUM	FORMATION	DATUM
13 3/8-456-475 sx				
8 5/8-4542-2600 sx				
5 1/2-9020-1400 sx				
*2 7/8-8498				
	TD 9020 (BSPG)		PBD	

IP (Bone Spring) Perfs 8501-8530 P 100 BOPD + 50 BW. Pot based on 24 hr test. GOR *600; gty *41

CONTR Tahoe Drlg #4 OPRSELEV 3735 GR, 3750 KB SUBS 14

F.R. 5-6-85
 PD 9200 RT (Bone Spring)

5-21-85 Drlg 3600
 5-22-85 Drlg 3945
 5-28-85 Drlg 5555
 5-30-85 Drlg 6375
 6-4-85 Drlg 7985
 6-6-85 Drlg 8455
 6-13-85 TD 9020; Rng Csg
 *No Cores or DST's

7-29-85 TD 9020; Complete
 Perf (Bone Spring Upper) 8501-8530 w/1 SPF
 *Acid (8501-8530) 5000 gals (15% NEFE)
 *Frac (8501-8530) 42,000 gals gel + 96,400# sd
 *LOG TOPS: Base Salt 2520, Yates 2698,
 Queen 3911, Penrose 4152, San Andres 4836,
 Bone Spring 7009, Bone Spring Lower 8660
 *LOGS RUN: CDL, CDD, SONL, MICL, GRDL
 8-1-41 NM