			BTATE LAND OFFICE BURDING BARTA FE NEW MERCO 8/501	
APPLICA	TION FOR AUT	DRIZATION TO INJECT Secondary Recovery Pressure Maintenance Dinnesal Storage on qualifies for administrative approval? yea no The Eastland Oil Company P.O. Drawer 3488. Midland. y: George D. Neal Phone: 915/683/6293 Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary. yansion of an existing project? Sea no the Division order number authorizing the project that identifies all wells and leases within two miles of any proposed injection concerning the reverse shall include a description of each the Division order number authorizing the project that identifies all wells of public record within the area of review which e proposed injection zone. Such data shall include a description of each of any plugged well illustrating all plugging detail. Descharge and maximum daily rate and volume of fluids to be injected; her the system is open or closed; bed average and maximum faily rate and volume of fluids to be injected; bed average and maximum faily rate and volume of inferred from existing terature, studies, nearby wells, etc.). Driate geological data on the injection zone including appropriate lithelogic doginal zone formation water (may be measured or inferred from existing terature, studies, nearby wells, etc.). proposed stimulation program, if any. printel logging and test data on the well. (If well logs have been filed sicial analysis of fresh water from two or more fresh water wells (if d producing) within one mile of any injection or disposal well showing wells and bates samples were taken. Dr disposal vells must make an affirmative statement that they have		
Ι.	Purpose: Applicat			
11.	Operator:	The Eastland Oi	1 Company	
	Address: _	P.O. Drawer 3488	, Midland,	
	Contact par	ty: <u>George D. Ne</u>	al	Phone: _915/683/6293
111.	Well data:			
Ι٧.	Is this an expansion of an existing project? Ses In no If yes, give the Division order number authorizing the project			
۷.	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 whi 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.			
V11.	Attach data on the proposed operation, including:			
	 Proposed average and maximum daily rate and volume of fluids to be injected; Whether the system is open or closed; Proposed average and maximum injection pressure; Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and 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.). 			
VJII.	Attach appropriate geological data on the injection zone including appropriate litholo 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 th	e proposed stimulat	tion program, if any.	
х.	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 svai]able 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 for			
XIV.	Certificati	on		
	I hereby ce to the best	rtify that the info of my knowledge ar	ormation submitted with nd belief.	this application is true and corr
	Name:	<u>George D. Neal</u>	<u>,</u> т	itle <u>Vice President - Production</u>
	Signature:	thenge Dr	neal	Date: November 20, 1985

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:

- 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.