STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, New Mexico 87505 RECEIVED SEP 2 9 2009 Re

FORM C-108

Revised June 10, 2003

APPLICATION FOR AUTHORIZATION TO INJECT BSOCD

I.	PURPOSE: Secondary Recovery Pressure Maintenance X Disposal S Application qualifies for administrative approval? X Yes No	torage			
II.	OPERATOR: OGX Resources, LLC (Ogrid 217955)				
	ADDRESS: c/o P.O. Box 953, Midland, TX 79702				
	CONTACT PARTY: Ann Ritchie, Regulatory Agent PHONE: 432 684-6381				
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				
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:				
	 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 reinje 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, a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, n wells, etc.). 	ttach a			
*VIII.	I. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters wit total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.				
X.	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 resub	mitted)			
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 sources 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 know and belief.	ledge			
	NAME: Ann Ritchie TITLE: Regulatory Agent				
	SIGNATURE:DATE: 8-3-09				
i	E-MAIL ADDRESS: ann.wtor@gmail.com If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: Updated filing requested by OCD	ed.			

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 the 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, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

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

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

INJECTION WELL DATA SHEET

OPERATOR: OGX Resources, LLC				
WELL NAME & NUMBER: Turquoise 30 Federal, We			245	328
WELL LOCATION:60' FNL & 1980' FWL	<u>C</u>	<i>¥</i> 30	<u>26S</u>	29 E
1930 FOOTAGE LOCATION	UNIT LETTER	SECTION	TOWNSHIP	RANGE
WELLBORE SCHEMATIC		WELL CONSTR		
	Hole Size:17	/ 1/2"	Casing Size:	_13 3/8"
	Cemented with:	_600 sx.	orcircula	ntedft ³
Current and	Top of Cement: circ	culated to surface	Method Determine pit.	d:circulated to
Current and Proposed Attached.		Intermedia	ate Casing	
Attached.	Hole Size:11"_		Casing Size:8 5/	8"
	Cemented with: _12	200 sx.	or	ft ³
	Top of Cement: _ci	rculated to surface	Method Determine	d: circulated to pit
		Production (Casing/Liner	
	Hole Size:7 7/8"_		Casing Size:5 l	/2"
	Cemented with:	800 sx sx.	or	ft ³
	Top of Cement:	_4050'	Method Determine Energy completion	
	Total Depth: Initial: 87	754', well P&A 6-18-02		
e ·	<u>Injection Interval</u> From: <u>4700</u>	,	to <u>5975'</u>	

(Perforated or Open Hole; indicate which)

INJECTION WELL DATA SHEET

T	ubing Size: _2 3/8"Lining Material:plastic coated
Ty	pe of Packer:Baker AD-1 Tension Packer
Pac	cker Setting Depth: _4670'
Otl	her Type of Tubing/Casing Seal (if applicable):
	Additional Data
1.	Is this a new well drilled for injection? Yes_X_No
	If no, for what purpose was the well originally drilled? _Santa Fe Energy Resources, Inc. drilled well in July 1996. Devor SFS Operating plugged the well in June 2002
2.	Name of the Injection Formation:Delaware
3.	Name of Field or Pool (if applicable): _Wildcat Delaware
4.	Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used.
	8244-8264', CIBP @ 8200' w/35' cement on top; 7254-7278' plugged off well P&A June 2002.
5.	Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:Delaware non-productive in area @ approx 4800'