

STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION HOBBS DISTRICT OFFICE

2-5-92

BRUCE KING GOVERNOR POST OFFICE BOX 1980 HOBBS, NEW MEXICO 88241-1980 (505) 393-6161

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501 RE: Proposed: MC DHC NSL NSP SWD WFX PMX
Gentlemen:
I have examined the application for the: Sandstone Bil & Bas Jon 36 State # 2-14 36-7-31 Operator Lease & Well No. Unit S-T-R and my recommendations are as follows: OX
Youns very truly, Action Jerry Sexton Supervisor, District 1

of the earlier submittal.

drilled in 1979 Iteam #XI Attached

OIL CONSERVATION DIVISION POST OFFICE BOX 2088 STATE LAND OFFICE BUILDING SANTA FE, NEW MEXICO 87501

FORM C-108 Revised 7-1-81

I.	Purpose:	THORIZATION TO INJECT				
1.	Applica	☐ Secondary Recovery ☑ Pressure M tion qualifies for administrative appr	oval?	<u>е</u> у		
II.	Operator:	Sandstone Oil & Gas				
	Address: 1330 East 8TH Street Ste. 304					
	Contact pa	rty: David Moore	Ph	one	: 915-334-8531	
III.	Well data:	√ell 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 If yes, giv	this an expansion of an existing project? yes X no yes, give the Division order number authorizing the project				
٧.	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.	II. 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.). 					
VIII.	Attach appropriate geological data on the injection zone including appropriate lithological, 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.	Certificati	ion				
	I hereby ce	ertify that the information submitted to of my knowledge and belief.	with this	app	plication is true and correc	
	Name: Dav		Title	Pa	artner	
	Signature:	David More	Date	:	1/27/91	

Ito ms # VI, VIII.& W Submitted To The State When well was