

GOVERNOR

STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION HOBBS DISTRICT OFFICE

10/13/95

POST OFFICE BOX 1980 HOBES, NEW MEXICO 88241-1980 (505) 393-6161

NSL-3583(50) 10/16/95

OIL CONSERVATION DIVISION P. 0. BOX 2088 SANTA FE, NEW MEXICO 87501

| RE: | Proposed:<br>MC |   |     |  |  |  |  |  |  |  |
|-----|-----------------|---|-----|--|--|--|--|--|--|--|
|     | DHC             |   |     |  |  |  |  |  |  |  |
|     | NSL X           |   | so  |  |  |  |  |  |  |  |
|     | NSP             | ~ | - 0 |  |  |  |  |  |  |  |
|     | SWD             |   |     |  |  |  |  |  |  |  |
|     | WFX             |   |     |  |  |  |  |  |  |  |
|     | РМХ             |   |     |  |  |  |  |  |  |  |

Gentlemen:

NK

I have examined the application for the:

± li V-1/M Inc 33-215-37 Operator

and my recommendations are as follows:

Yours very truly, Jerry Sexton Supervisor, District 1

/ed

# Mobil Exploration & Producing U.S. Inc.

AS AGENT FOR MOBIL PRODUCING TX & N.M. INC.

HOUSTON DIVISION 12450 GREENSPOINT DRIVE HOUSTON, TEXAS 77060-1991

September 21, 1995

State of New Mexico Oil Conservation Division State Land Office P.O. Box 6429 Santa Fe, NM 87505

Attn: Mr. Michael Stognor

ADMINISTRATIVE ORDER NSP-1708 EXCEPTION TO RULE 104(F) & SIMULTANEOUS DEDICATION OF ACREAGE - E.O. CARSON #10 BLINEBRY GAS POOL, LEA COUNTY, NEW MEXICO

Dear Mr. Stognor:

Mobil Exploration & Producing U.S. Inc., (MEPUS), as agent for Mobil Producing Texas & New Mexico, Inc. (MPTM) respectfully requests your authorization for an amendment to the above order as follows.

We request administrative approval to plug back the subject well, which is currently TA'd in the Hare Simpson pool, and produce it. as a gas well, out of the Blinebry and to share a non-standard gas proration unit of 120 acres with the E.O. Carson #14, the remaining 40 acres being dedicated to the E.O. Carson #9 which is also producing, as an oil well, out of the Blinebry.

Well No. 10 is also an unorthodox location, being 589' from the South Line and 1909' from the West Line (Unit F) of Section 33, T-21-S, R-37-E, Lea County, New Mexico and, therefore, we also request exception to Rule 104(F).

The following items are being furnished, in triplicate, in support of this application:

- 1) Form C-101 Application for Permit to Drill, Deepen or Plug Back
- 2) Form C-102 Well location and acreage dedication plats
- 3) Current listing of offset operators



# Mobil

## State of New Mexico Oil Conservation Division Santa Fe Office - Attn: Mr. Michael Stognor

#### September 21, 1995

A copy of this letter and attachments are being furnished to offset operators on the attached list by certified mail as their notification of this application.

Should you need additional information please feel free to contact me at (713) 775-2081.

Yours very truly,

Fatricia B. Swanner

Patricia B. Swanner Regulatory Technician -Mid-Continent - Houston

cc: Oil Conservation District - Hobbs Office Offset Operators



District I PO Box 1960, Hobbs, NM 88241-1960 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2068, Santa Fe, NM 87504-2088

Date:

9/22/95

Phone:

(713) 775-2081

State of New Mexico Enc., y, Minerals & Natural Resources Department

**OIL CONSERVATION DIVISION** 

P.O. Box 2088

Santa Fe, NM 87504-2088

Form C-101 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office State Lease - 6 Copies Fee Lease - 5 Copies

#### AMENDED REPORT

## APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

|   |                                      |                                  | rator name ar |   |                   |                                  | ,            |                                       |                    | OGRID Number                         |  |  |
|---|--------------------------------------|----------------------------------|---------------|---|-------------------|----------------------------------|--------------|---------------------------------------|--------------------|--------------------------------------|--|--|
| MOBIL EXP   |                                      | 15144                            |               |   |                   |                                  |              |                                       |                    |                                      |  |  |
| MOBIL PRO   |                                      | <sup>3</sup> API Number          |               |   |                   |                                  |              |                                       |                    |                                      |  |  |
| 12450 GRE   | EENSPOINT                            | DRIVE, HO                        | OUSTON, T     | X 7706  | 0                 |                                  |              |                                       |                    | 30-025-06982                         |  |  |
| <sup>4</sup> Pr   | operty Code                          |                                  |               |   | 5                 | Property Name                    | e            |                                       |                    | <sup>6</sup> Well Number             |  |  |
|   |                                      |                                  |               | E   | E.O. CARSO        | N                                |              |                                       | 10                 |                                      |  |  |
|   |                                      |                                  |               |   |                   |                                  |              |                                       |                    |                                      |  |  |
| UL or lot no.   | Section                              | Township                         | Range         | Lot. Idn Feet from the North/South Line Feet from the |                   |                                  | East/West li | ne County                             |                    |                                      |  |  |
| F   | 33                                   | 215                              | 37E           | <u> </u>  | 205               |                                  | OUTH         | 1909                                  | WEST               | LEA                                  |  |  |
|   |                                      | 8                                | Proposed      | Bottom H  | lole Location     | If Different                     | From Sur     | face                                  |                    |                                      |  |  |
| UL or lot no.   | Section                              | Township                         | Range         | Lot. Idn  | Feet from t       | he North                         | South Line   | Feet from the                         | East/West li       | ne County                            |  |  |
|   |                                      | 9 Proposed                       | Poul 1        | 1   |                   | <u> </u>                         | · · · _      | <sup>10</sup> Proposed P              | Pool 2             |                                      |  |  |
|   |                                      | BLINEBR                          | GAS           |   |                   |                                  |              | -                                     |                    |                                      |  |  |
| · · · · · · · · · · · · · · · · · · ·   |                                      |                                  |               |   |                   | L                                |              | . <u>.</u>                            |                    |                                      |  |  |
| 11 Work 1   | Гуре Code                            | 12                               | Well Type C   | Code  | 13 Cable/         | Rotary                           | 14 Lea       | se Type Code                          | <sup>15</sup> Grou | <sup>15</sup> Ground Level Elevation |  |  |
| PLU   | <b>JGBACK</b>                        |                                  | GAS           |   | ROT               | ARY FEE                          |              |                                       |                    | 3464' DF                             |  |  |
|   | ultiple                              |                                  |               |   |                   | nations <sup>19</sup> Contractor |              |                                       |                    | Spud Date                            |  |  |
|   |                                      |                                  |               | · · ·   |                   |                                  |              |                                       |                    | -                                    |  |  |
|   |                                      |                                  | PBTD 59       | · · · · · · · · · · · · · · · · · · ·                 | BLINE             |                                  | rogram       | NA                                    |                    | ASAP                                 |  |  |
| Hole  | Size                                 | C.ssi                            | ng Size       |   | g weight/foot     |                                  |              | Sacks of Ceme                         | <u></u>            | Fatiant 1700                         |  |  |
|   |                                      |                                  |               |   |                   |                                  |              | · · · · · · · · · · · · · · · · · · · |                    | Estimated TOC                        |  |  |
|   |                                      |                                  |               |   | <u>48#</u> 36#    | <u>327</u><br>378                |              |                                       |                    | Surface                              |  |  |
| <u> </u>  |                                      |                                  | 576<br>7"     | · †   | 23#               | 662                              |              | <u> </u>                              |                    | Surface<br>2553'                     |  |  |
|   | · · · · ·                            |                                  | ,<br>         |   | 2.57              |                                  |              |                                       |                    | 2003                                 |  |  |
|   |                                      |                                  |               | <u> </u>  |                   |                                  |              | <u>- · </u>                           |                    |                                      |  |  |
| <ul> <li><sup>22</sup> Describe the blo</li> <li>1. POH w/2</li> <li>2. Set CIBP</li> <li>3. Perf. Bli</li> </ul>                             | wout prevent<br>2-3/8" tb<br>@ 5990' | ion program, i<br>9.<br>w/20' cm | fany. Use ad  | lditional she   | eets if necessary | K give the data                  | on the prese | nt productive zone                    | and proposed       | new productive zone.                 |  |  |
| <sup>23</sup> I hereby certify that the information given above is true and complete to the best<br>of my knowledge and belief.<br>Signature: |                                      |                                  |               |   |                   | OIL CONSERVATION DIVISION        |              |                                       |                    |                                      |  |  |
| Printed name: P   | atricia B.                           | Swanner                          |               |   |                   | Title:                           |              |                                       |                    |                                      |  |  |
| Elat.   | hnician                              |                                  |               |   | Approval Dat      | e:                               | E            | xpiration Date:                       |                    |                                      |  |  |

Conditions of Approval:

Attached



District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2068, Santa Fe, NM 87504-2088 State of New Mexico Enc. y, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION** 

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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AMENDED REPORT

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

| API Number   |   |                 |                                       | Pool Code    |              |          |                  | Pool Nam                | ne             |                    |  |
|--|---|-----------------|---------------------------------------|--------------|--------------|----------|------------------|-------------------------|----------------|--------------------|--|
| 30-025-06982   |   |                 |                                       | 72480        |              | BLINE    | BRY GAS          |                         |                |                    |  |
| Property   | Code  |                 |                                       | Properv Name |              |          |                  |                         |                |                    | Well Number                                  |
| 802  |   | E.O. C/         | RSON                                  |              |              | 10       |                  |                         |                |                    |  |
| OGRID No. Operator Name<br>MOBIL EXLPLORATION & PRODUCING U.S. INC., |   |                 |                                       |              |              |          |                  |                         | Elevation      |                    | Elevation                                    |
| 151  | 15144 AS AGENT FOR MOBIL PRODUCING TEXAS & NEW MEXICO<br><sup>10</sup> Surface Location |                 |                                       |              |              |          |                  |                         |                |                    | 3464' DF                                     |
|  |   |                 | · · · · · · · · · · · · · · · · · · · |              | Surrace      |          |                  |                         |                |                    |  |
| Ut or lot no.<br>F   | Section   | Township        | Range                                 | Lot. Idn     | Feet from th |          | North/South Line | Feet from the           | East/W         |                    | County                                       |
| <b>F</b>   | 33  | 215             | 37E                                   |              | 58           | <u> </u> | N SOUTH          | 1909                    | WE             | ST                 | LEA  |
|  |   |                 | Bott                                  | om Hole Loo  | cation If I  | Differe  | nt From Surface  |                         |                |                    |  |
| UL or lot no.  | Section   | Township        | Range                                 | Lot. Idn     | Feet from    | i the    | North/South Line | Feet from the           | East/W         | est line           | County                                       |
| <sup>12</sup> Dedicated Acre   | s <sup>13</sup> Join  | nt or Infill 14 | Consolidatio                          | n Code 15 Or | der No.      |          | I                | L                       | - I            |                    |  |
| 120  |   | JOINT           |                                       | NSI          | P-1708       |          |                  |                         |                |                    |  |
| NO ALLO  | WABLE   | WILL BE A       | SSIGNED                               | TO THIS C    | OMPLE        | ΠΟΝΙ     | UNTIL ALL INT    | TERESTS HAV             | VE BEE         | NCON               | SOLIDATED                                    |
|  |   |                 |                                       |              |              |          | APPROVED B       |                         |                |                    |  |
|  |   | <u> </u>        |                                       |              |              | 1        |                  | <sup>17</sup> OPERA     | TORCE          | RTIFI              | CATION                                       |
| 1.1  |   | 31-             | ,                                     |              |              |          |                  | I hereby certify        | that the       | information        | contained herein is<br>knowledge and belief. |
| ្តា  | 10001   | 1               |                                       |              |              |          |                  | in a compres            |                | es. of my          | knowledge and bellej.                        |
|  | 1909'_  |                 | #14                                   |              |              |          |                  |                         |                |                    |  |
|  |   |                 | - 1                                   |              |              |          |                  |                         |                |                    |  |
| i  |   |                 | 2551                                  |              |              |          |                  | Fatori                  | R              | Cur                |  |
|  |   | 1               |                                       |              |              |          |                  | Signature               | <u> </u>       | JWC                | mer_   |
| 1  |   |                 |                                       |              |              |          |                  | Patricia B.             | Swann          | er                 |  |
|  | 1909  |                 |                                       |              |              |          |                  | Printed Name            | _              |                    |  |
| 0 #9   |   |                 | _#10                                  |              |              |          |                  | Regulatory              | Techn          | ician              |  |
| 589' #9  |   |                 | <b>6</b><br><b>6</b><br><b>7</b>      |              |              |          |                  | 9/22/95                 |                |                    |  |
|  |   | 1               | Ψ SEC.                                | 33           |              |          |                  | Date                    |                |                    |  |
|  |   |                 | r21s                                  | R 37E        |              | 1        |                  | <sup>18</sup> SURVEY    | OR CE          | RTIFIC             | ATION  |
|  |   |                 | 215                                   | RJ/L         |              |          |                  | I hereby certify il     | hat the wei    | l location         | shown on this play                           |
|  |   |                 |                                       |              |              |          |                  | me or under my          | supervision,   | of actu<br>and the | al surveys made by<br>at the same is true    |
|  |   |                 |                                       |              |              |          |                  | and correct to the best | of my belief.  |                    |  |
|  |   |                 |                                       |              |              |          |                  |                         |                |                    |  |
|  |   |                 |                                       |              |              |          |                  |                         |                |                    |  |
|  |   |                 |                                       |              |              | +        |                  | Date of Survey          |                |                    |  |
|  |   |                 |                                       |              |              |          |                  | Signature and Seal of   | Professional S | urveyer:           |  |
|  |   |                 |                                       |              |              |          |                  |                         |                |                    |  |
|  |   |                 |                                       |              |              |          |                  |                         |                |                    |  |
|  |   |                 |                                       |              |              |          |                  |                         |                |                    |  |
|  |   |                 |                                       |              |              |          |                  |                         |                |                    |  |
|  |   |                 |                                       |              |              |          |                  | Certificate Number      |                |                    |  |



District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2088, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

| API Number                             |  |               |              | Pool Code     |           |                    |                  | Pool Nam                 | e               |             |   |
|--|--|---------------|--------------|---------------|-----------|--------------------|------------------|--------------------------|-----------------|-------------|---|
| 30-025-06985                           |  |               |              | 72480         |           | BLINE              | BRY GAS          |                          |                 |             |   |
| Property Code Property Name Well Numbe |  |               |              |               |           |                    |                  |                          |                 | Well Number |   |
| 802                                    |  | E.O. CAF      |              |               |           |                    |                  |                          |                 | 14          |   |
| OGRIE                                  | D No.  | MOBIL         |              | ATION & PR    | Opera     | itor Nai<br>U.S. I | me<br><b>NC</b>  |                          |                 |             | Elevation                                 |
| 151                                    | 44   |               |              | MOBIL PROD    | UCING TE  | XAS 8              | & NEW MEXICO     |                          |                 | F           | (B 3469'                                  |
|  |  |               |              | 10            | Surface L | ocatio             | )n               |                          |                 |             |   |
| UI or lot no.                          | Section  | Township      | Range        | Lot. Idn      | Feet from | the                | North/South Line | Feet from the            | East/Wes        | st line     | County                                    |
| С                                      | 33   | 215           | 37E          |               | 731       | ,                  | NORTH            | 1909' WEST               |                 |             | LEA                                       |
|  | Bottom Hole Location If Different From Surface |               |              |               |           |                    |                  |                          |                 |             |   |
| UL or lot no.                          | Section  | Township      | Range        | Lot. Idn      | Feet from | the                | North/South Line | Feet from the            | East/We:        | st line     | County                                    |
| <sup>12</sup> Dedicated Acro           | es 13 Joint                                    | or Infill 14C | onsolidation | n Code 15 Orc | Ler No.   |                    | J                |                          | <u>_</u>        |             |   |
| 120                                    | J  | DINT          |              | NSL           | -1708     |                    |                  |                          |                 |             |   |
| L                                      |  |               | SIGNED       |               |           |                    | UNTIL ALL INT    | TERESTS UAN              | E DEEN          | JCON        | SOLIDATED                                 |
|  |  |               |              |               |           |                    | APPROVED B       |                          |                 |             |   |
|  |  |               |              |               |           |                    |                  | <sup>17</sup> OPERA      | TOR CE          | RTIFI       | CATION                                    |
| 21                                     |  |               |              |               |           |                    |                  |                          |                 |             | contained herein is knowledge and belief. |
| 0                                      | 0001   | 131           |              |               |           |                    |                  |                          |                 | . ,         |   |
|  | 909'   |               | 14           |               |           |                    |                  |                          |                 |             |   |
| l i                                    |  | )             |              |               |           |                    |                  | $\square$                |                 | _           |   |
|  | 2051   |               |              |               |           |                    |                  |                          |                 |             |   |
|  |  |               |              |               |           |                    | 1 arnei          | a 1.                     | 2.0             | vanner_     |   |
| i                                      |  |               |              |               |           |                    |                  | Signature<br>Patricia B. | Swanne          |             |   |
| 1909'                                  |  |               |              |               |           |                    |                  | Printed Name             | owanne          |             |   |
|  | ·  |               |              |               |           |                    |                  | Regulatory               | Technic         | cian        |   |
|  |  |               |              |               |           |                    |                  | Title                    |                 |             |   |
| 589' 9                                 |  | 589           | CEC          | 22            |           |                    |                  | 9/22/95<br>Date          | ····            |             |   |
|  |  | <u>/' 1</u>   | SEC.<br>T21S | 33<br>R37E    |           | <u> </u>           |                  |                          |                 |             |   |
|  |  |               | 1210         | N3/L          |           |                    |                  | <sup>18</sup> SURVEY     | OR CER          | TIFIC       | CATION                                    |
|  |  |               |              |               |           |                    |                  |                          |                 |             | shown on this plat<br>al surveys made by  |
|  |  |               |              |               |           |                    |                  |                          | supervision,    |             | at the same is true                       |
|  |  |               |              |               |           |                    |                  |                          |                 |             |   |
|  |  |               |              |               |           |                    |                  |                          |                 |             |   |
|  |  |               |              |               |           |                    |                  | D + 60 -                 |                 | <u> </u>    |   |
|  |  |               | -            |               |           |                    |                  | Date of Survey           |                 |             |   |
|  |  |               |              |               |           |                    |                  | Signature and Seal of    | Professional Su | ifveyer:    |   |
|  |  |               |              |               |           |                    |                  |                          |                 |             |   |
|  |  |               |              |               |           |                    |                  |                          |                 |             |   |
|  | <b>~</b> .                                     |               |              |               |           |                    |                  |                          |                 |             |   |
|  |  |               |              |               |           |                    |                  |                          |                 |             |   |
|  |  |               |              |               |           |                    |                  | Certificate Number       |                 |             |   |



District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2088, Santa Fe, NM 87504-2088 State of New Mexico Enc. 59, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

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**AMENDED REPORT** 

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

| API Number   |                      |             |               | Pool Code          |                                |                |                  | Pool Name  |                            |                       |   |  |  |
|--|----------------------|-------------|---------------|--------------------|--------------------------------|----------------|------------------|--|----------------------------|-----------------------|---|--|--|
| 30-025-06981   |                      |             |               | 06660 BLINEBRY OIL |                                |                |                  |  |                            |                       |   |  |  |
| Property   |                      |             |               |                    | Proper                         | -              |                  |  |                            |                       | Well Number                                 |  |  |
| 802  |                      | E.O. C      |               |                    |                                |                |                  |  |                            |                       | 9   |  |  |
| OGRID No. Operator Name<br>MOBIL EXLPLORATION & PRODUCING U.S. INC., |                      |             |               |                    |                                |                |                  |  |                            | Elevation             |   |  |  |
| 151  | 44                   |             |               | MOBIL PROD         | UCING TEX                      | AS 8           | NEW MEXICO       |  |                            |                       | KB 3469'                                    |  |  |
| [  | <u> </u>             | <u> </u>    | T             | 10                 | Surface Lo                     |                |                  |  |                            |                       |   |  |  |
| UI or lot no.  | Section              | Township    | Range         | Lot. Idn           | Feel from the North/South Line |                | Feet from the    | East/We  |                            | County                |   |  |  |
| E 33 21S 37E 2051' NORTH 589' WEST                                   |                      |             |               |                    |                                |                |                  |  | LEA                        |                       |   |  |  |
| <sup>11</sup> Bottom Hole Location If Different From Surface         |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
| UL or lot no.  | Section              | Township    | Range         | Lot. Idn           | Feet from th                   | he             | North/South Line | Feet from the  | East/West line             |                       | County                                      |  |  |
| <sup>12</sup> Dedicated Acre   | s <sup>13</sup> Join | t or Infill | Consolidation | n Code 15 Orc      | ier No.                        |                |                  | L  | <u> </u>                   |                       | <u> </u>                                    |  |  |
| 40   |                      |             |               | NSL                | 1708                           |                |                  |  |                            |                       |   |  |  |
| NO ALLO  | WABLE V              |             |               |                    |                                |                | JNTIL ALL INT    |  |                            | NCON                  | SOLIDATED                                   |  |  |
|  |                      | ORAN        | IONSTA        | NDARD UN           | IT HAS B                       | EEN            | APPROVED B       | Y THE DIVISI   | ON                         |                       |   |  |  |
|  |                      | 1           |               |                    |                                |                |                  | <sup>17</sup> OPERA  | TOR CE                     | ERTIFI                | ICATION                                     |  |  |
|  |                      |             |               |                    |                                |                |                  | l hereby certify that the information contained herein is true and complete to the best of my knowledge and belief . |                            |                       |   |  |  |
| 205  | 909'                 | 1           |               |                    |                                |                |                  |  |                            |                       | . ,   |  |  |
| h- <u>-</u>  |                      | ¢           | #14           |                    |                                |                |                  |  |                            |                       |   |  |  |
| 1  |                      |             | 1             |                    |                                |                |                  | $\square$  | ~                          |                       |   |  |  |
| <br> 1   |                      |             | 2051          |                    |                                | Intria B Swame |                  |  |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  | Signature  |                            |                       |   |  |  |
|  |                      | !           |               |                    |                                |                |                  | Patricia B.  | Swanne                     | er'                   |   |  |  |
|  | <sup>909</sup> '     |             | #10           |                    |                                |                |                  | Printed Name<br>Regulatory Technician  |                            |                       |   |  |  |
| → → → →) <sub>#9</sub>   | 9                    |             | 110           |                    |                                |                |                  | Title  |                            |                       |   |  |  |
| 589'   |                      | \$%;        |               |                    |                                |                |                  | 9/22/95  |                            |                       |   |  |  |
|  |                      | I           | SEC. 3        | 3                  |                                |                |                  | Date   |                            |                       |   |  |  |
|  |                      |             | T21S          | R37E               |                                |                |                  | <sup>18</sup> SURVEY   | OR CE                      | RTIFIC                | CATION                                      |  |  |
|  |                      |             |               |                    |                                |                |                  | I hereby certify th<br>was plotted from  | hat the wel<br>field notes | l location<br>of acti | n shown on this plat<br>ual surveys made by |  |  |
|  |                      |             |               |                    |                                |                |                  | me or under my<br>and correct to the best  | supervision,               | and th                | hat the same is true                        |  |  |
|  |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  | Date of Survey   |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  | Signature and Seal of  | Professional S             | urveyer;              |   |  |  |
|  |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
| -  |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
|  | * :                  |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  |  |                            |                       |   |  |  |
|  |                      |             |               |                    |                                |                |                  | Certificate Number   |                            |                       |   |  |  |



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September 21, 1995

State of New Mexico Oil Conservation Division Santa Fe Office - Attn: Mr. Michael Stognor

## ADMINISTRATIVE ORDER NSP-1708 EXCEPTION TO RULE 104(F) & SIMULTANEOUS DEDICATION OF ACREAGE - E.O. CARSON #10 BLINEBRY GAS POOL, LEA COUNTY, NEW MEXICO

#### **OFFSET OPERATORS**

Chevron U.S.A. Inc. P.O. Box 1635 Houston, TX 77251

Amoco Production Co., P.O. Box 3092 Houston, TX 77253

Amerada Hess Corp. 1201 Louisiana, Suite 700 Houston, TX 77002-5691 Texcao Inc. P.O. Box 2100 Denver, CO 80201

Arco Oil & Gas Co., P.O. Box 160 Midland, TX 79702

John H. Hendrix Corp. 223 W. Wall, Suite 525 Midland, TX 79701-4519



#### WAIVER

Mobil Exploration & Producing U.S. Inc., 12450 Greenspoint Drive Houston, TX 77060 Attn: Ms. Patricia B. Swanner

## ADMINISTRATIVE ORDER NSP-1708 EXCEPTION TO RULE 104(F) & SIMULTANEOUS DEDICATION OF ACREAGE - E.O. CARSON #10 BLINEBRY GAS POOL, LEA COUNTY, NEW MEXICO

We, the undersigned, have been furnished a copy of Mobil Exploration & Producing U.S. Inc.'s, as Agent for Mobil Producing TX & N.M. Inc. request for administrative approval to plug back the subject well and produce it, as a gas well, out of the Blinebry.

We understand well No. 10 is located on the same proration unit as wells E.O. Carson #9 and #14 and is an unorthodox location, being 589' from the South Line and 1909' from the West Line (Unit F) of Section 33, T-21-S, R-37-E, Lea County, New Mexico.

Please be informed that we, as an offset operator, have no objection to this application as set forth in MEPUS' application dated September 21, 1995.

Sincerely,

Company

Signature

Representative

Title

Date

