



STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE

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

NSL-3542
7/5/95

RE: Proposed:

MC	_____
DHC	_____
NSL	<u>X</u>
NSP	_____
SWD	_____
WFX	_____
PMX	_____

Gentlemen:

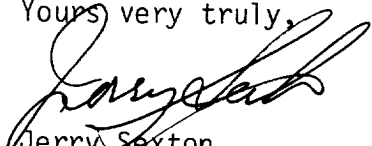
I have examined the application for the:

<u>Exxon Corp</u>	<u>FF Hardison B #3-G</u>	<u>34-21-37</u>
Operator	Lease & Well No. Unit	S-T-R

and my recommendations are as follows:

OK

Yours very truly,


Jerry Sexton
Supervisor, District 1

/ed

EXXON COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

MIDLAND PRODUCTION ORGANIZATION

OPERATIONS INTEGRITY

April 21, 1995

Unorthodox Location
F. F. Hardison "B" Well No. 3
Unit Letter G
Section 34, T21S, R37E
Lea County, New Mexico
Tubb Oil and Gas Pool

Mr. W. J. LeMay
New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Dear Mr. LeMay:

Exxon Corp. requests administrative approval of an Unorthodox Location for the F. F. Hardison "B" Well No. 3 in the Tubb Oil and Gas Pool. According to Tubb Oil and Gas Pool rules, this well will be at an Unorthodox Location and a copy of the C-102 is attached and shows a 160 acre Standard Gas Proration Unit. This well is currently in the Blinebry Oil and Gas Pool (NSP-1663, dated March 3, 1993) and is shut-in.

Offset operators have been notified of this request and a copy of the return receipts are enclosed. The C-102 and C-103 have been sent to the District (copy enclosed). If you have any questions, please call me at (915) 688-6782.

Sincerely,



Alex M. Correa

AMC:mym
Attachments
4\ffhb3.ltr

EXXON COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

MIDLAND PRODUCTION ORGANIZATION

OPERATIONS INTEGRITY

April 13, 1995

Unorthodox Location
F.F. Hardison B Well No. 3
Unit Letter G
Section 34, T21S, R37E
Lea County, NM
Tubb Oil & Gas Pool

Offset Operators

Gentlemen:

Exxon Corp. is requesting administrative approval of an Unorthodox Location for the F.F. Hardison B well No. 3 in the Tubb Oil and Gas Pool. This well is currently in the Blinebry (Pro Gas) Consolidated Pool and is shut-in. A copy of the C-102 and C-103 are attached. If you have any questions, please call me at (915) 688-6782.

Sincerely,

Alex M. Correa

amc-offset.doc

RECEIVED

APR 27 1959

JOE HIGDON
OFFICE

OFFSET OPERATORS

**F. F. Hardison "B" Lease
Section 34, T21S-R37E
Lea County, New Mexico**

Tubb Oil and Gas Pool

Amoco Production
Attn: Land Department
P.O. Box 3092
Houston, TX 77253

Bravo Operating Co.
P.O. Box 2160
Hobbs, NM 88241-2160

Chevron USA Inc.
Attn: Land Department
P.O. Box 1150
Midland, TX 79702

Conoco Inc.
Attn: J. W. Hoover
10 Desta Dr., Suite 100W
Midland, TX 79705

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

Marathon
Attn: Land Department
P.O. Box 552
Midland, TX 79702

Mobil Exploration & Production
U.S. Inc.
Attn: Land Department
P.O. Box 633
Midland, TX 79702

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Amoco Production Attn: Land Department P.O. Box 3092 Houston, TX 77253	4. Article Number P 047 805 429 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X <i>James Hawkins</i>	8. Addressee's Address (ONLY if requested and fee paid) NGFA permits APR 20 1995
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery APR 17 1995	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Conoco Inc. Attn: J. W. Hoover 10 Desta Dr., Suite 100W Midland, TX 79705	4. Article Number P 047 805 428 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X <i>James Hawkins</i>	8. Addressee's Address (ONLY if requested and fee paid) APR 21 1995
6. Signature — Agent X <i>Chris Gonzales</i>	
7. Date of Delivery 4-20-95	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Mobil Exploration & Production U.S. Inc. Attn: Land Department P.O. Box 633 Midland, TX 79702	4. Article Number P 047 805 427 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X <i>James Hawkins</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>B. Sanchez</i>	
7. Date of Delivery APR 14 1995	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Bravo Operating Co. P.O. Box 2160 Hobbs, NM 88241-2160	4. Article Number P 047 805 426 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED .
5. Signature — Addressee <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>[Signature]</i>	
7. Date of Delivery 4/17/95	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

FFHB

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: John H. Hendrix 223 W. Wall, Suite 525 Midland, TX 79701	4. Article Number P 047 805 425 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED .
5. Signature — Addressee <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>[Signature]</i>	
7. Date of Delivery 4/17/95	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

FFHB

<p>SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.</p> <p>Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge) 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>	
<p>3. Article Addressed to:</p> <p>Chevron USA Inc. Attn: Land Department P.O. Box 1150 Midland, TX 79702</p>	<p>4. Article Number P 047 805 389</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>
<p>5. Signature — Addressee X <i>James Hawkins</i></p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature — Agent X <i>[Signature]</i></p>	
<p>7. Date of Delivery <i>APR 17 1995</i></p>	

PS Form 3811, Apr. 1989 ★ U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

FFHB

<p>SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.</p> <p>Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge) 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>	
<p>3. Article Addressed to:</p> <p>Marathon Attn: Land Department P.O. Box 552 Midland, TX 79702</p>	<p>4. Article Number P 047 805 424</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>
<p>5. Signature — Addressee X <i>James Hawkins</i></p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature — Agent X <i>[Signature]</i></p>	
<p>7. Date of Delivery <i>APR 14 1995</i></p>	

PS Form 3811, Apr. 1989 ★ U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT