

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
APPLICATION FOR MULTIPLE COMPLETION

Form C-107  
5-1-61

Operator <b>Conoco Inc.</b>		County <b>Lea</b>	Date <b>November 24, 1981</b>
Address <b>P. O. Box 460, Hobbs, NM 88240</b>		Lease <b>Warren Unit</b>	Well No. <b>90</b>
Location of Well	Unit <b>B</b>	Section <b>35</b>	Township <b>20S</b>
			Range <b>38E</b>

1. Has the New Mexico Oil Conservation Commission heretofore authorized the multiple completion of a well in these same pools or in the same zones within one mile of the subject well? YES X NO        **Conoco/Warren**
2. If answer is yes, identify one such instance: Order No. R-6522 ; Operator Lease, and Well No.: Unit No. 82

3. The following facts are submitted:	Upper Zone	Intermediate Zone	Lower Zone
a. Name of Pool and Formation	<b>Blinebry Oil &amp; Gas</b>		<b>D-K Abo Pool</b>
b. Top and Bottom of Pay Section (Perforations)	<b>**6000'</b>		<b>**7050'</b>
c. Type of production (Oil or Gas)	<b>Oil</b>		<b>Oil</b>
d. Method of Production (Flowing or Artificial Lift)	<b>Artificial Lift</b>		<b>Artificial Lift</b>

4. The following are attached. (Please check YES or NO)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Waivers consenting to such multiple completion from each offset operator, or in lieu thereof, evidence that said offset operators have been furnished copies of the application.*
*** <input type="checkbox"/>	<input type="checkbox"/>	d. Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)

5. List all offset operators to the lease on which this well is located together with their correct mailing address.

\* Mobil Producing Texas and New Mexico Inc., P. O. Box 633, Midland, TX 79701

Mewbourne Oil Company, 701 S. Cecil, Hobbs, NM 88240

Offset operators have been sent attached letter and copy of this application.

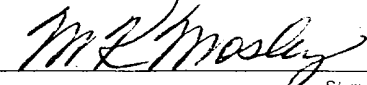
\*\* These depths represent zone markers.

\*\*\* Electric logs will be submitted when available.

NMOCD - Santa Fe (2), NMOCD - Hobbs (2), File

6. Were all operators listed in Item 5 above notified and furnished a copy of this application? YES X NO       . If answer is yes, give date of such notification November 24, 1981.

CERTIFICATE: I, the undersigned, state that I am the Division Manager of the Conoco Inc. (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

  
Signature

\*Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.

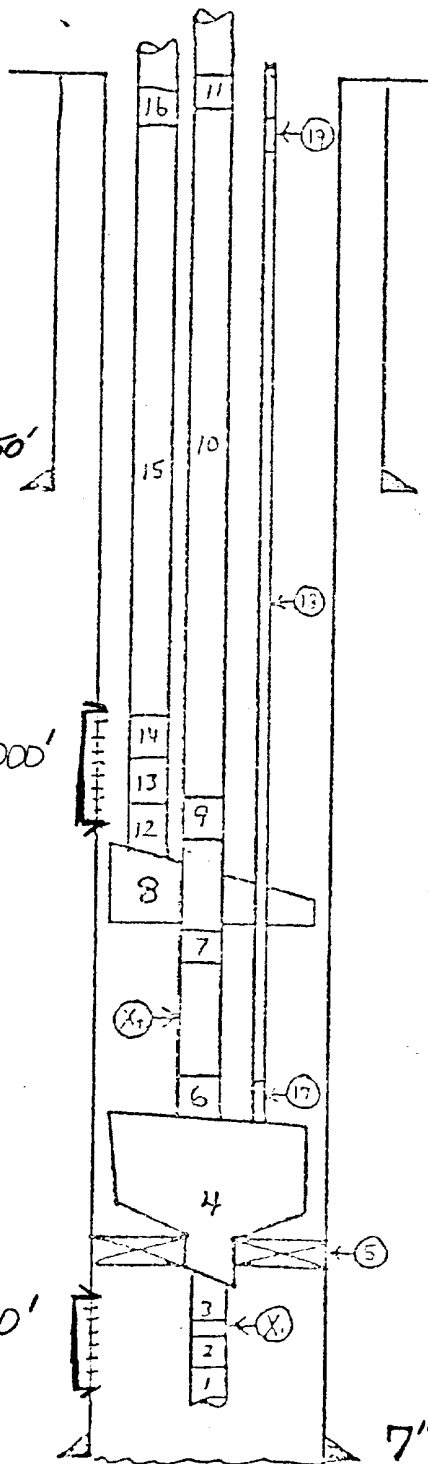
Watten Unit, Well No. 90  
PROPOSED COMPLETION EQUIPMENT

9 5/8", 36 #/ft CSQ @ 1650'  
w/ 611 SX.

Blinebry PERFS 6000'

ABO PERFS 7050'

T.D. - 7750'



1. 1 JT. 2 3/8" BUTTRESS TBG O.E.
2. TUBS S.N. - BUTTRESS
- X<sub>1</sub> 2 3/8" BUTTRESS TBG.
3. X-OVER 2 3/8" BUTT. X EUEB.
4. VENT HEAD ASSY.
5. PKR OTIS "WB" @
6. X-OVER 2 3/8" BUTT. X EUEB.
- X<sub>2</sub> 2 3/8" BUTTRESS TBG.
7. X-OVER 2 3/8" BUTT. X EUEB.
- 8.\* TRIPLE STRAINING ANCHOR
9. X-OVER 2 3/8" BUTT. X EUEB.
10. 2 3/8" BUTTRESS TBG.
11. X-OVER 2 3/8" BUTT. X EUEB.
12. J-LATCH ASSY.
13. X-OVER 2 3/8" BUTT. X EUEB.
14. BLINEBRY S.N. - BUTTRESS
15. 2 3/8" BUTTRESS TBG.
16. X-OVER 2 3/8" BUTT. X EUEB.
17. STINGER COLLET
18. 1 1/4" 10nd IJ TBG.
19. X-OVER 10nd IJ 1 1/4" x 10nd

NOTE\*: TO BE LOCATED BELOW  
BOTTOM BLINEBRY PERFS.

7", 26 1/2 #/ft K-55 CSQ. @  
w/ 1254 SX.





Mark K. Mosley  
Division Manager  
Production Department  
Hobbs Division  
North American Production

Conoco Inc.  
P.O. Box 460  
726 E. Michigan  
Hobbs, NM 88240  
(505) 393-4141

November 24, 1981

Mobil Producing Texas and New Mexico Inc.  
P. O. Box 633  
Midland, Texas 79701

Gentlemen:

Dual Completion of Warren Unit Blinebry/Abo No. 90

Attached is a copy of a New Mexico Oil Conservation Division Application for Multiple Completion for the Conoco operated Warren Unit Blinebry/Abo No. 90. We are currently drilling this well and are making application to the NMOCD to dually complete. In order to expedite NMOCD approval we request from you, as offset operator, a waiver to dually complete this well.

Enclosed are three copies of this letter. Please execute the waiver below within ten days and send one copy to the NMOCD and return one copy to us. Addressed and stamped envelopes are enclosed.

Yours very truly,

M. K. Mosley  
Division Manager

RLM/jlj  
Attachment

cc: Mewbourne Oil Company  
701 S. Cecil  
Hobbs, New Mexico 88240

Approved

By: \_\_\_\_\_

Date: \_\_\_\_\_



Mark K. Mosley  
Division Manager  
Production Department  
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Approved

By: \_\_\_\_\_

Date: \_\_\_\_\_