District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 South Pacheco, Santa Fe, NM 87505

District IV

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505 Form C-102 Revised October 18, 1994 Instructions on back

Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

☐ AMENDED REPORT

			ELL LO			REAGE DEDI	CATION PI	LAT			
	er .		<sup>2</sup> Pool Cod	e	<sup>3</sup> Pool Name						
30-015-20304				· · · · · · · · · · · · · · · · · · ·		Undesignated Upper Strawn					
<sup>4</sup> Property	Code	<sup>5</sup> Property Name						* Well Number		Well Number	
<del></del>		Dero Federal Com						1			
'OGRID	No.	•				erator Name			* Elevation		
148967		Saga Petroleum Limited Liability						0. 3285 GR		3285 GR	
					<sup>10</sup> Surface	Location					
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West	line	County	
Р	35	198	28E	<u> </u>	660	South	660	East		Eddy	
			<sup>11</sup> Bot	tom Hol	e Location I	f Different From	om Surface				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West	line	County	
Dedicated Acr		l l	Consolidatio	n Code 15 C	Order No.						
320		N	С		SW633						
NO ALLOV	VABLE V					ON UNTIL ALL			N CO	NSOLIDATED	
		OR A	NON-STA	ANDARD	UNIT HAS B	EEN APPROVED	BY THE DIV	ISION			
16							<sup>17</sup> OPEI	17 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is true and complete to the best of my knowledge and belie			
							I hereby cert				
							true and com	plete to the be.	st of my	knowledge and belie	
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		<u> </u>					XV .	Signature Clement			
							Signature				
							111/	Jøe Clement			
					Ì		Printed Nam				
							Area	Enginee	r		
					1		Title June	10, 199	98		
							Date	10, 155			
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							was plotted fi	om field notes	of actua	n shown on this plat Il surveys made by n	
					Ì		or under my .	supervision, an best of my bei	id that th	e same is true and	
							COFFECT TO THE	ഗലാ ഗൃ my Del	uej.		
							Date of Surve				
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Certificate Number