District I PO Box 1980, Ilobbs, NM \$8241-1980 811 South First, Artesia, NM 88210 Natrict III 1000 Rio Brazos Rd., Aziec, NM 87410 District IV

2040 South Pachece, Santa Fe, NM 87505

## 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

BH	Plat
L'/I	p (00)

## WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	<sup>1</sup> Pool Code	<sup>2</sup> Pool Code <sup>3</sup> Pool Name		
30-031-20499	49580	Papers Wash E	ntrada	
<sup>4</sup> Property Code	<sup>5</sup> Property Name		* Well Number	
1.6789	PWU		001	
'OGRID No.	¹ Opera	itor Name	* Elevation	
014634	Merrion Oil & Gas	Corp	6604' GR	

## 10 Surface Location

UL or lot so.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	15	19N	05W	SWNW	1980	north	990	west	McKinley

## 11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
K	15	19N	05W	NESW	2280	south	1581	west	McKinley
13 Dedicated Acres 13 Joint or Infill 14 Consocidation Code 15 Order No.									
						,			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16		17 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is  true and complete to the best of my knowledge and belief
1980'		· · · · · · · · · · · · · · · · · · ·
990'		Signature Printed Name
<pwu 1<="" no.="" td=""><td></td><td>Steven S. Dunn  Title Operations Manager  Date 4/09/96</td></pwu>		Steven S. Dunn  Title Operations Manager  Date 4/09/96
1581'	on 15	18SURVEYOR CERTIFICATION  I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by
2280'	DEOLEVED APR 1 (1936 D	me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey
7	OH CON. DIV.	Signature and Seal of Professional Surveyer:
	Obel o	Certificate Number