

- OFFSET LOWER HOSPEN PRODUCER
- LOWER HOSPEN INJECTOR WITH PREVIOUS APPROVAL
- PROPOSED CANDIDATE

HOSPDAH AREA
McKinley County, New Mexico
WELL STATUS MAP

ATTACHMENT 2
AREA OF REV.

0 500 1000 1500 2000
SCALE FEET

10-11-1984

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-102
Revised 1-1-89

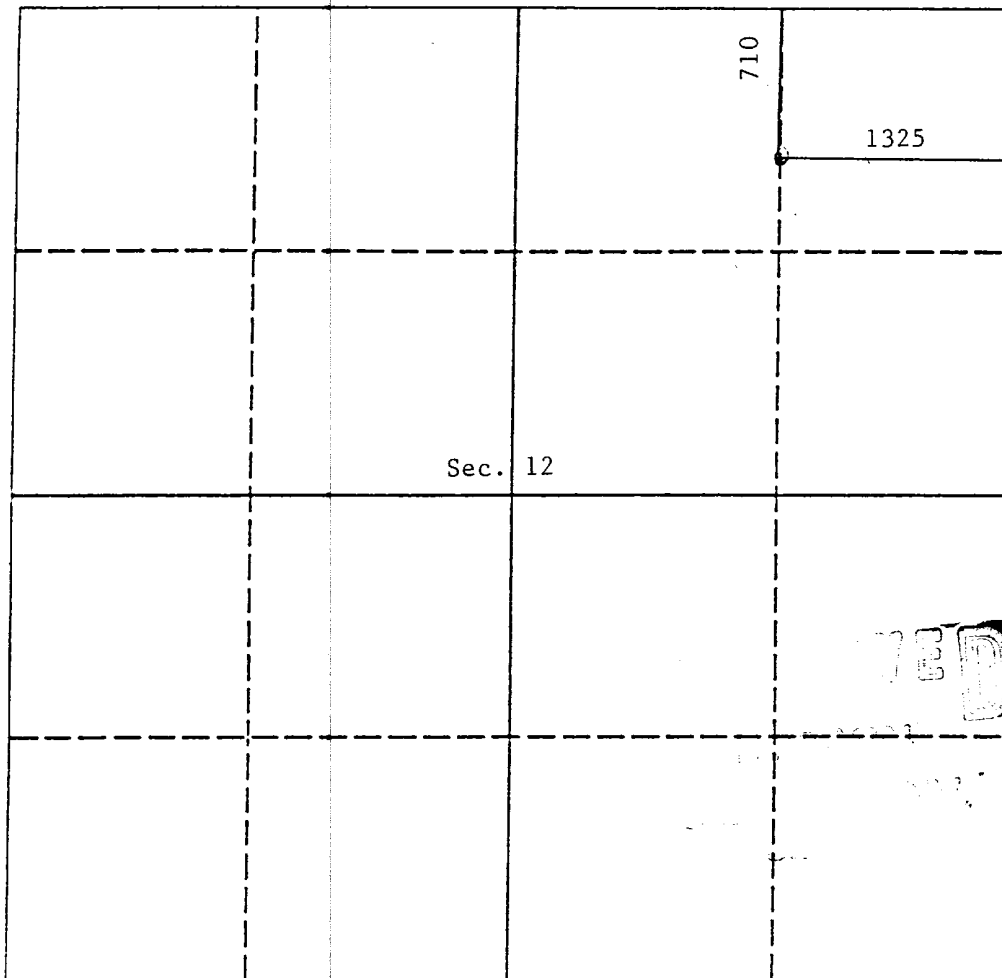
WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator Citation Oil & Gas Corp.		Lease South Hospah Unit		Well No. 63
Unit Letter A	Section 12	Township 17N	Range 9W	County McKinley

Actual Footage Location of Well: 710 feet from the North line and 1325 feet from the East line				
Ground level Elev. 6966	Producing Formation South Hospah Lower Sand		Pool South Hospah Lower Sand	Dedicated Acreage: Injection Acres

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc?
☐ Yes ☐ No If answer is "yes" type of consolidation _____
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature
Sharon Ward
Printed Name
Sharon Ward
Position
Prod. Reg. Supv.
Company
Citation Oil & Gas Corp.
Date
2-15-94

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
Signature & Seal of Professional Surveyor
Certificate No.

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0