

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-383
Revised 1-1-8

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

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

DISTRICT II
P.O. Drawer 00, Arama, NM 88210

DISTRICT III
1000 Rio Rancho Rd., Arama, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT
All Distances must be from the outer boundaries of the section

Operator Meridian Oil Inc.			Lease Angel Peak (SF-047039C)		Well No. 500
Unit Lease L	Section 7	Township 28 North	Range 10 West	County San Juan	
Actual Surface Location of Well: 1450 feet from the South line and 790 feet from the West line					
Ground Level Elev. 5746'		Producing Formation Fruitland Coal Basin		Dedicated Acreage 257.95 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or Indian marker on the plat below.

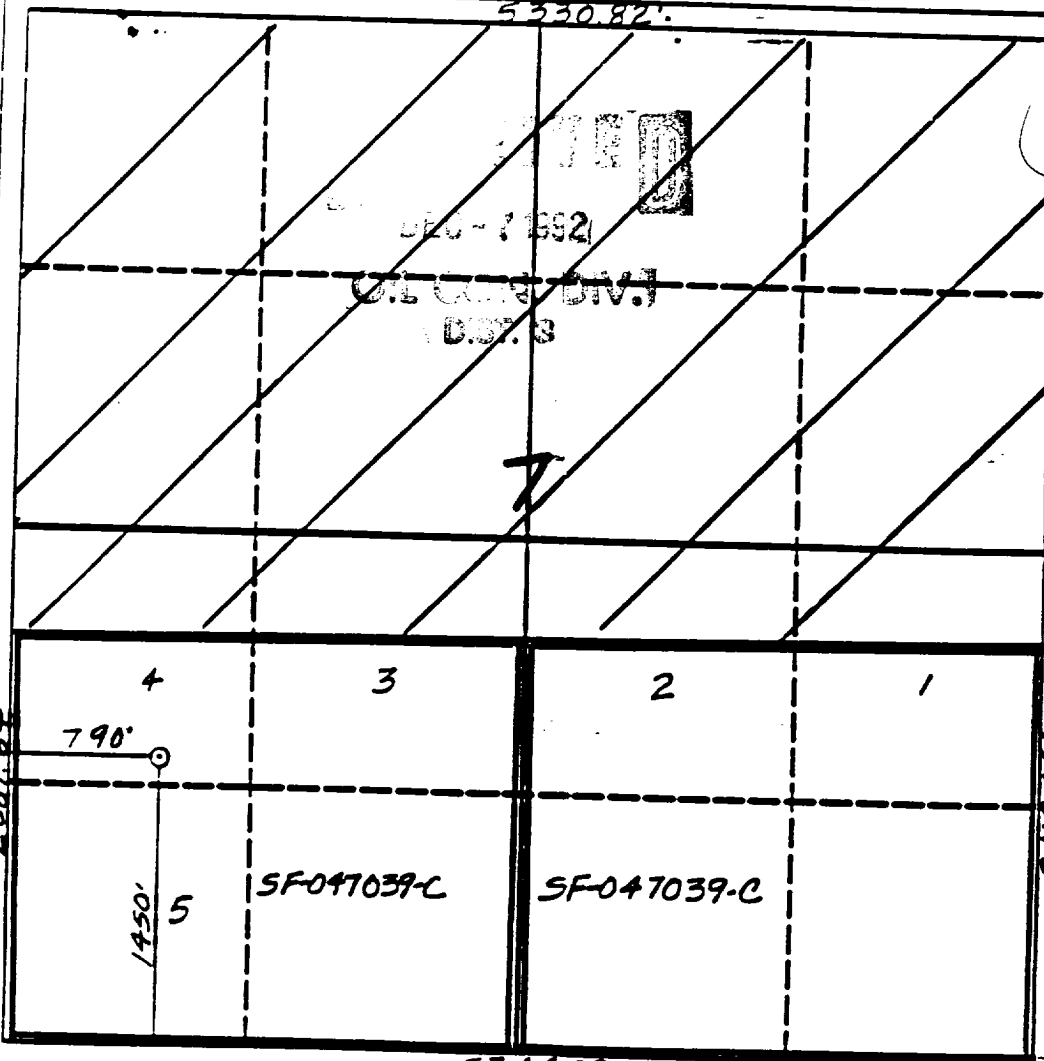
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been considered by commutation, insurance, force-pooling, etc.?

☒ Yes ☐ No If answer is "yes" type of consideration: CA #883362

If answer is "no" list the owners and their descriptions which have actually been considered. (Use reverse side of this form if necessary.)

No acreage will be assigned to the well until all interests have been considered (by commutation, insurance, force-pooling, or otherwise) or until a non-allocated unit, containing such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature
Peggy Bradfield

Printed Name
Regulatory Affairs

Position
Meridian Oil Inc.

Company
12-4-92

Date

SURVEYOR CERTIFICATION

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

9-5-90

Date Surveyed

Signature

Printed Name

Position

Company

Date

Signature

Printed Name