

<u>DEPTH</u>	<u>DEVIATION</u>
264'	1/2°
786'	3/4°
984'	1-1/2°
1286'	1-1/4°
1756'	1°
2161'	1°
2565'	1°
3069'	1°
3569'	1°
4035'	1-1/4°
4750'	1-1/4°

A F F I D A V I T

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation tests taken on AMOCO PRODUCTION COMPANY'S Jaquez Gas Com "A" No. 1A located 1100' FNL and 1000' FWL, Section 5, T-29-N, R-9-W, San Juan County, New Mexico.

Signed CC Luoboda
Title Area Adm. Supvr.

THE STATE OF NEW MEXICO)) SS.
COUNTY OF SAN JUAN)

BEFORE ME, the undersigned authority, on this day personally appeared E. E. Syoboda known to me to be Area Adm. Supvr. for Amoco Production Company and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SWORN TO before me, a Notary Public in and for said County and State this 15th day of February, 1977.

Eleanor P. Brown
Notary Public

My Commission Expires: December 28, 1979



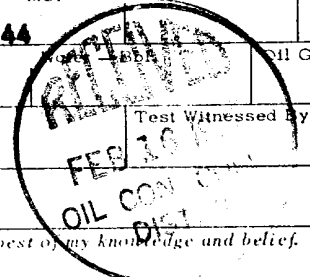
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U.S.G.S.	2
LAND OFFICE	
OPERATOR	1

Form C-105
Revised 11-1-8

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL		OIL WELL <input type="checkbox"/>		GAS WELL <input checked="" type="checkbox"/>		DRY <input type="checkbox"/>		OTHER <input type="checkbox"/>	
b. TYPE OF COMPLETION		NEW WELL <input checked="" type="checkbox"/>		WORK OVER <input type="checkbox"/>		DEEPEN <input type="checkbox"/>		PLUG BACK <input type="checkbox"/>	
				DIFF. RESVR. <input type="checkbox"/>		OTHER <input type="checkbox"/>			
2. Name of Operator AMOCO PRODUCTION COMPANY									
3. Address of Operator 501 Airport Drive, Farmington, New Mexico 87401									
4. Location of Well									
UNIT LETTER D LOCATED 1100 FEET FROM THE North LINE AND 1000 FEET FROM									
THE West LINE OF SEC. 5 TWP. 29N RGE. 9W NMPM									
15. Date Spudded 12-29-76		16. Date T.D. Reached 1-5-77		17. Date Compl. (Ready to Prod.) 1-22-77		18. Elevations (DF, RKB, RT, GR, etc.) 5677' GL, 5690' KB		19. Elev. Casinghead 5677'	
20. Total Depth 4750'		21. Plug Back T.D. 4712'		22. If Multiple Compl., How Many		23. Intervals Drilled By 0-TD		23. Intervals Rotary Tools 0-TD	
24. Producing Interval(s), of this completion - Top, Bottom, Name 3866-4570' Mesaverde								25. Was Directional Survey Made No	
26. Type Electric and Other Logs Run Induction-Gamma Ray and Densilog								27. Was Well Cored No	
28. CASING RECORD (Report all strings set in well)									
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED			
9-5/8"	32.3#	262'	12-1/4"	280 sx		-			
7"	20#	2625'	8-3/4"	505 sx		-			
29. LINER RECORD									
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	30. TUBING RECORD				
4-1/2"	2423'	4750'	275		SIZE 2-3/8"		DEPTH SET 4585'		PACKER SET
31. Perforation Record (Interval, size and number) 3866-75, 3879-3945, 3967-70, 3982-95, 4000-20, 4080-88, 4102-06, 4110-14, 4169-74, 4238-40, 4274-79, 4298, 4338, 4341-44, 4379-82, 4386-92, 4484-92, 4495-99, 4503-10, 4522, 4528-33, 4540-42, 4548-60, 4565-70 x 1 SPF					32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.				
DEPTH INTERVAL					AMOUNT AND KIND MATERIAL USED				
3866-4020 - 135,000# sn, 67,452 gal frac fld									
4080-4392 - 55,000# sn, 30,198 gal frac fld									
4484-4570 - 60,000# sn, 32,928 gal frac fld									
33. PRODUCTION									
Date First Production 1-22-77		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) SI			
Date of Test 1-22-77	Hours Tested 3	Choke Size 3/4"	Prod'n. For Test Period →	Oil - Bbl. 244	Gas - MCF 244	Water - Bbl.	Gas - Oil Ratio		
Flow Tubing Press. 150	Casing Pressure 530	Calculated 24-Hour Rate →	Oil - Bbl. 1953	Gas - MCF 1953	Oil Gravity - API (Corr.)				
34. Disposition of Gas (Sold, used for fuel, vented, etc.) To be sold									
35. List of Attachments									
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.									
SIGNED El Svoboda			TITLE Area Adm. Supvr.			DATE 2-14-77			



INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 30 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 2, from.....to.....

No. 3, from.....to.....

No. 4, from.....to.....

No. 5, from.....to.....

No. 6, from.....to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.

No. 2, from.....to.....feet.

No. 3, from.....to.....feet.

No. 4, from.....to.....feet.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
3866'	4022'	156'	Cliffhouse				
4022'	4484'	462'	Manatee				
4484'	4618'	134'	Point Lookout				

DISTRIBUTION	
STATE	1
FEDERAL	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator AMOCO PRODUCTION COMPANY	
Address 501 Airport Drive, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jaquez Gas Com "A"	Well No. 1A	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter D	1100	Feet From The North	Line and 1000	Feet From The West	
Line of Section 5	Township 29N	Range 9W	, NMPM, San Juan		County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau, Inc.	P. O. Box 108, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 5	Twp. 29N	Rge. 9W	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 12-29-76	Date Compl. Ready to Prod. 1-22-77		Total Depth 4750'		P.B.T.D. 4712'			
Elevations (DF, RKB, RT, GR, etc.) 5677' GL, 5690' KB	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 3866'		Tubing Depth 4585'			
Perforations 3866-75, 3879-3945, 3967-70, 3982-95, 4000-20, 4080-88, 4102-06, 4110-14, 4169-74, 4238-40, 4274-79, 4298, 4338, 4341-44, (over)					Depth Casing Shoe 4750'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		262'		280 sz			
8-3/4"	7"		2625'		505 sz			
6-1/4"	4-1/2"		2423-4750'		275 sz			
	2-3/8"		4585'					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 1953	Length of Test 3 hr.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 475	Casing Pressure (shut-in) 650	Choke Size .75

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

E. L. S. ...
(Signature)
Area Adm. Supvr.
(Title)
February 14, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED **FEB 16 1977**, 19____
BY **ORIGINAL SIGNED BY N. E. MAXWELL JR.**
PETROLEUM ENGINEER DIST. NO. 3
TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Perforations continued:

**4379-82, 4386-92, 4484-92, 4495-99, 4503-10, 4522, 4528-33, 4540-42, 4548-60
x 4565-70 with 1 SPF.**

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PROBATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Amoco Production Company

Address 501 Airport Drive Farmington, NM 87401

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> casinghead Gas	<input checked="" type="checkbox"/> Condensate

RECEIVED JAN 22 1985 OIL & GAS

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Jaquez Gas Com A</u>	Well No. <u>1A</u>	Pool Name, including Formation <u>Blanco Mesaverde</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>D</u> : <u>1100</u> Feet From The <u>North</u> Line and <u>1000</u> Feet From The <u>West</u>				
Line of Section <u>5</u> Township <u>29N</u> Range <u>9W</u> NMPL: <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> <u>Permian Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1702 Farmington, NM 87499</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 990 Farmington, NM 87401</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>D S 29N 9W</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

B.D. Shaw
(Signature)
Admin. Supervisor
(Title)
1-2-85
(Date)

OIL CONSERVATION DIVISION
APPROVED JAN 22 1985
BY Charles Shoker
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

Submit 4 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-134
Aug. 1, 1989

DISTRICT I
P.O. Box 1980, Hobbs, NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88211-0719

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

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

Permit No. 3-513
(For Division Use Only)

APPLICATION FOR EXCEPTION TO DIVISION ORDER R-8952
FOR PROTECTION OF MIGRATORY BIRDS Rule 8(b), Rule 105(b), Rule 312(h), Rule 313, or Rule 711(I)

Operator Name: El Paso Natural Gas Company

Operator Address: P.O. Box 1492, El Paso, Texas 79978

Lease or Facility Name LAcquez Co. Pm. H-1-E Location 1. W 5 29 D 9
Ut. Ltr. Sec. Twp. Rge

Size of pit or tank: 12x12 Pit

Operator requests exception from the requirement to screen, net or cover the pit or tank at the above-described facility.

☒ The pit or tank is not hazardous to migratory waterfowl. Describe completely the reason pit is non-hazardous.

Under normal operating conditions this pit would not contain oil and thus would not constitute a water fowl hazard. Furthermore, the size of the pit and fencing is a deterrent to waterfowl landing in the pit.

1) If any oil or hydrocarbons should reach this facility give method and time required for removal:

In 72 hours from discovery oil should be removed. Operators discharging to El Paso's pit have also been advised of compliance requirements.

2) If any oil or hydrocarbons reach the above-described facility the operator is required to notify the appropriate District Office of the OCD with 24 hours.

Operator proposes the following alternate protective measures:

RECEIVED

SEP 23 1989

OIL CON. DIV
DIST. ?

CERTIFICATION BY OPERATOR: I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature Kenneth E. Beasley Title Mgr., Compliance Engr. Date _____

Printed Name Kenneth E. Beasley, IVI Telephone No. 915) 541-2146

FOR OIL CONSERVATION DIVISION USE

Date Facility Inspected APR 09 1992

Inspected by [Signature]

Approved by [Signature]

Title DEPUTY OIL & GAS INSPECTOR, DIST. #2

Date APR 21 1992

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LAND OFFICE	
OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

30-045-22296
Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name	
b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name Jaquez Gas Com "A"	
2. Name of Operator AMOCO PRODUCTION COMPANY		9. Well No. 1A	
3. Address of Operator 501 Airport Drive, Farmington, New Mexico 87401		10. Field and Pool, or Wildcat Blanco Mesaverde	
4. Location of Well UNIT LETTER D LOCATED 1100' FEET FROM THE North LINE AND 1000' FEET FROM THE West LINE OF SEC. 5 TWP. 29N RGE. 9W NMMPM		12. County San Juan	
21. Elevations (Show whether DF, RT, etc.) 5677' GL		21A. Kind & Status Plug. Bond Statewide	21B. Drilling Contractor Unknown
19. Proposed Depth 4750'		19A. Formation Mesaverde	20. Rotary or C.T. Rotary
22. Approx. Date Work will start January, 1977			

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	9-5/8"	32.3#	250'	280	circ.
8-3/4"	7"	20#	2625'	505	circ.
6-1/4"	4-1/2"	10.5#	4750'	275	circ.

Amoco proposes to drill the above well to develop the Mesaverde reservoir. The well will be drilled using rotary tools with water and Benex as the circulating media to the intermediate casing point. The well will be gas drilled from the intermediate casing point to TD. Production casing will be set thru the Mesaverde formation on completion. Perforations and stimulation will be based on analysis of open hole logs. Copy of all logs will be filed upon completion. Amoco's standard blowout prevention will be employed, see attached drawing for blowout preventer design.

Upon completion, the well location will be cleaned, and the reserve pit filled and leveled.

Gas produced from this well is dedicated to El Paso Natural Gas Company.

APPROVAL VALID
FOR 90 DAYS UNLESS

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEVELOP GAS IN A NEW PRODUCTION ZONE, GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

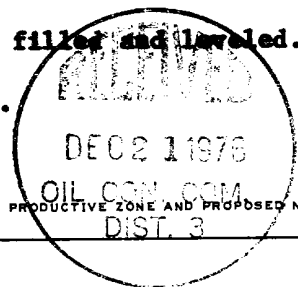
Signed [Signature] Title Area Engineer Date December 20, 1976

(This space for State Use)

SUPERVISOR DIST. 33

APPROVED BY [Signature] TITLE _____ DATE DEC 21 1976

CONDITIONS OF APPROVAL, IF ANY:



NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

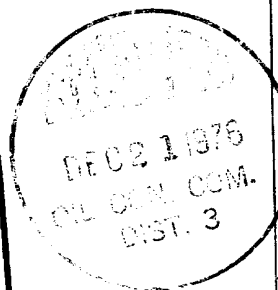
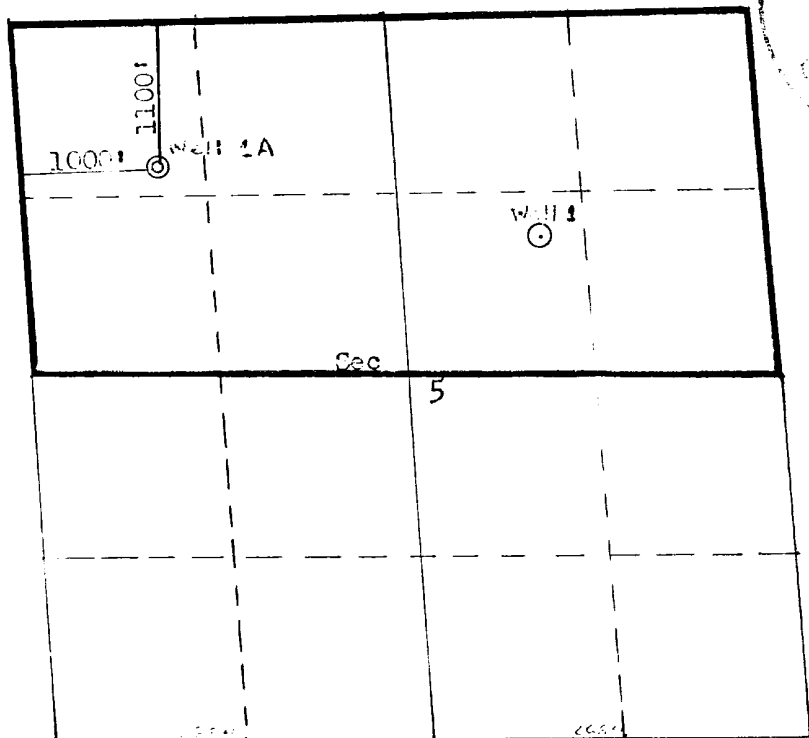
Operator Amoco Production Company			Lease Jaquez Gas Com A		Well No. 1A
Unit Letter D	Section 5	Township 29N	Range 9W	County San Juan	
Actual Footage Location of Well: 1100 feet from the North line and 1000 feet from the West line					
Ground Level Elev. 5677	Producing Formation Mesa Verde	Pool Blanco Mesaverde		Dedicated Acreage: 320 320.96 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks 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 interests 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 interests, has been approved by the Commission.



CERTIFICATION

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

Name
H. D. Montgomery

Position
Area Engineer

Company
AMOCO PRODUCTION COMPANY

Date
December 20, 1976

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
December 13, 1976

Registered Professional Engineer and Land Surveyor
Fred B. Kerr Jr.

Certificate No.
3950