	8/08 susper	ISE BROCKS	5/9/08	NSL		13029633
		NEW MEXICO OIL C	ering Bureau -	DIVISION		arbob Energy State #43
		ADMINISTRATIV	E APPLICAT	ION CHEC	KLIST	
۰T	HIS CHECKLIST IS N	IANDATORY FOR ALL ADMINISTR/ WHICH REQUIRE PRO	ATIVE APPLICATIONS FOR DCESSING AT THE DIVISION			REGULATIONS
	[DHC-Dow [PC-Po	ool Commingling] [OLS - [WFX-Waterflood Expansion	[B-Lease Comminglin Off-Lease Storage] on] [PMX-Pressure posal] [IPI-Injectior	g] [PLC-Pool [OLM-Off-Leas Maintenance I Pressure Incr	/Lease Commin se Measuremer Expansion] ease]	onse]
1]	TYPE OF AI [A]	PPLICATION - Check The Location - Spacing Unit - NSL INSP [		-		5849 5748
	Checl [B]	Cone Only for [B] or [C] Commingling - Storage -	Measurement	OLS 🗌	OLM	5748
	[C]	Injection - Disposal - Pre	essure Increase - Enhar		ery ] PPR	4.
	[D]	Other: Specify				
2]	NOTIFICAT [A]	TION REQUIRED TO: - C	Check Those Which A r Overriding Royalty I		Not Apply	
	[B]	Offset Operators, Le	easeholders or Surface	Owner 2	/28	PP
	[C]	Application is One V	Which Requires Publis	/ shed Legal Noti		
	[D]		Concurrent Approval 1 ent - Commissioner of Public Lan		)	D 58
	[E]	· /	Proof of Notification		s Attached, and	/or,
	[F]	Waivers are Attache				

#### [3] SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity. <u>5.6.200</u> Date

LAND & MARBOR. COM e-mail Address



**CERTIFIED RECEIPT RETURN** 

**Oil Conservation Division** 1220 St. Francis Drive Santa Fe, NM 87504

May 6, 2008

06 RID 14049

Attention: Richard Ezeanyim

## Re: Request for Administrative Approval of an Unorthodox Location

Dear Mr Ezeanyim:

Marbob Energy Corporation respectfully requests your consideration of the above referenced. Marbob Energy proposes to drill our D State No. 43 located at 1040' FNL & 1550' FWL of Section 36 in Township 17s, Range 28e as a Yeso test. An unorthodox location is being requested to avoid existing natural gas part of Inc Cotortat Pool Cotortat Pool Y050 foot Y050 foot gt& pipelines in the area. As you will notice the affected units are all part of the D State lease and we have recently drilled our No. 25 in unit C.

To aid in your review of this request, please find enclosed:

- A.) D State No. 43 Form C-102
- B.) Topographic Map of Area
- C.) Plat identifying Pipeline Locations
- D.) Plat identifying Affected/Offset Proration Units
- E.) Verification of Notices

Your attention to this matter is greatly appreciated. Should you have any questions or need further information, please do not hesitate to contact me.

Empire Yeco (96210) oit A rtesia Queen Grbg SA 6 Loxuetta Yeso Sincerély. kan y Dean Chumbley Artesia 6 Lorieta - yeso 96830 1 W" Land Department /dc

DISTRICT I 1625 N. FRENCH DR., HOBBS, NM 88240

DISTRICT II 1301 W. GRAND AVENUE, ARTESIA, NM 88210 State of New Mexico

Energy, Minerals and Natural Resources Department

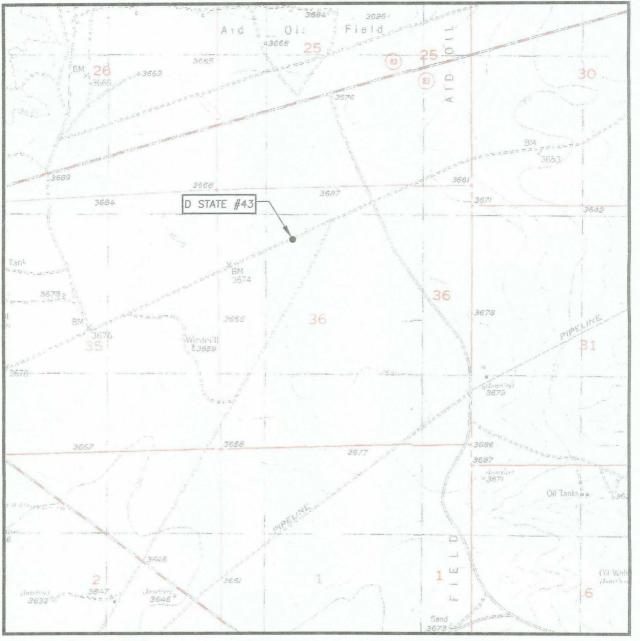
OIL CONSERVATION DIVISION



Form C-102 Revised October 12, 2005 Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

1301 W. GRAND AVENU DISTRICT III 1000 Rio Brazos F				1220 S Santa	SOUTH Fe, N	ST. 1 ew M	FRANCIS DR. exico 87505			e — 4 Copies e — 3 Copies
DISTRICT IV 1220 S. ST. FRANCIS I	DR., SANTA FE.	NM 87505	WELL LC	CATION	AND	ACREA	GE DEDICATI	ON PLAT	AMEND	ED REPORT
	Number			Pool Code				Pool Name		
Property Code					-	erty Nam			Well Nun	
						STATE			43	
OGRID No.		Operator Name MARBOB ENERGY CORPORATION					1 22.1	Elevatio 3682		
					Surfa	ce Loca	ation			
UL or lot No.	Section	Township	Range	Lot Idn		om the	North/South line	Feet from the	East/West line	County
C	36	17-S	28-E		10	40	NORTH	1550	WEST	EDDY
			Bottom	Hole Loo	cation	If Diffe	rent From Sur	face		
UL or lot No.	Section	Township	Range	Lot Idn	Feet fr	om the	North/South line	Feet from the	East/West line	County
Dedicated Acre	s Joint o	r Infill Co	nsolidation	Code Or	der No.					l
		1.16								
NO ALLO	WABLE W	ILL BE A	SSIGNED	TO THIS	COMPLE	TION U	NTIL ALL INTER	RESTS HAVE BI	EEN CONSOLIDA	ATED
		ORAN	NON-STAN	IDARD UN	IIT HAS	BEEN	APPROVED BY	THE DIVISION		
	2210-		Y=653 X=561	COORDINAT 27 NME 473.1 N 571.4 E 796327* N	J			I hereby herein is true my knowledge organization en or unleased m including the or has a right location pursu owner of such or to a volunt compulsory po by the division Signature Printed Nam	Da	te best of t this r interest e land t coation t this tit has interest, at or a re entered te
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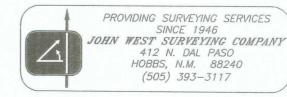
# LOCATION VERIFICATION MAP

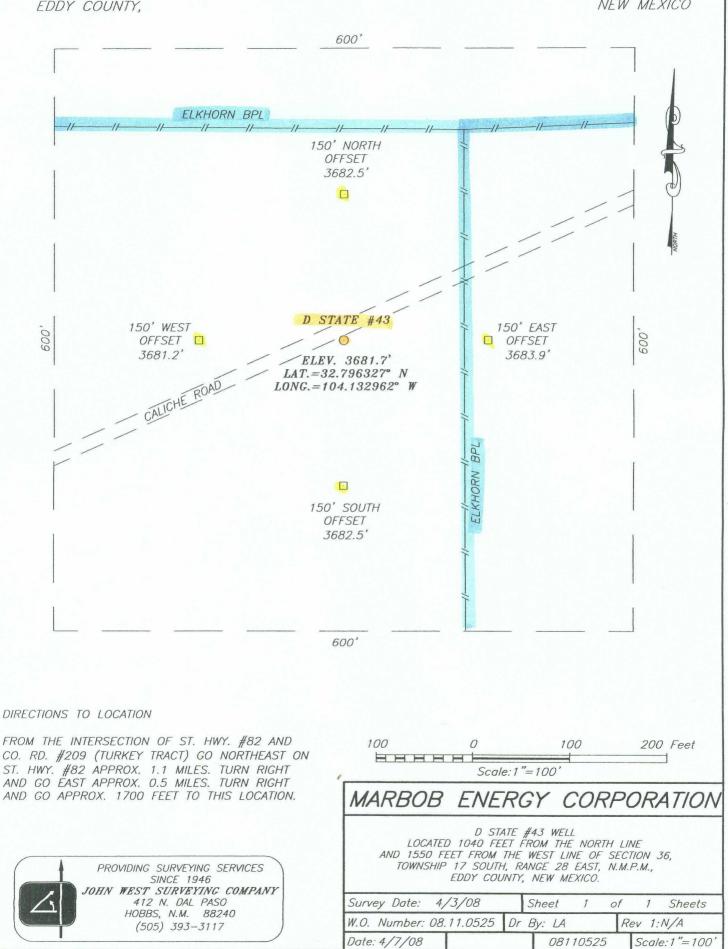


SCALE: 1" = 2000'

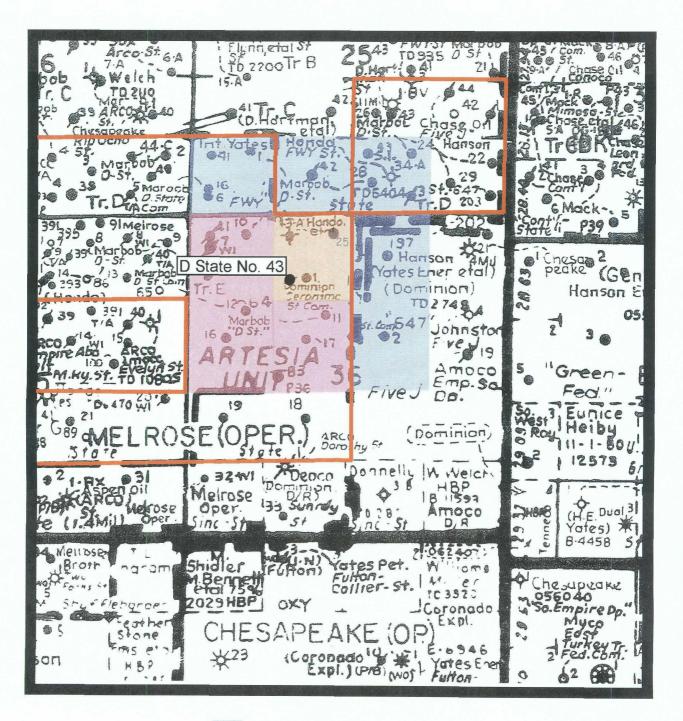
SEC. <u>36</u> TWP.<u>17</u>–S RGE.<u>28</u>–E SURVEY <u>N.M.P.M.</u> COUNTY EDDY STATE NEW MEXICO DESCRIPTION <u>1040' FNL & 1550' FWL</u> ELEVATION <u>3682'</u> MARBOB ENERGY OPERATOR <u>CORPORATION</u> LEASE <u>D STATE</u> U.S.G.S. TOPOGRAPHIC MAP RED LAKE, N.M.

CONTOUR INTERVAL: RED LAKE, N.M. – 10'





SECTION 36, TOWNSHIP 17 SOUTH, RANGE 28 EAST, N.M.P.M., EDDY COUNTY. NEW MEXICO



D State No. 43 Offset Units
D State No. 43 Affected Units
D State No. 43 Proration Unit
D State Lease Boundary

ENDER: COMPLETE THIS SECTION	A Signature		
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature	Agent	
Print your name and address on the reverse so that we can return the card to you.		Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.			
, Article Addressed to:	D. Is delivery address different from item 17 If YES, enter delivery address below:	Yes No	
Melrose Operating Company		ļ	
1000 W Wilshire Blvd Ste 223 Oklahoma City, OK 73116-7003		i i	
Oklahoma City, OK 73116-7003 D State NSL			
	3. Service Type		
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	insured Mail C.O.D.		
	4. Restricted Delivery? (Extra Fee)	D Yes	
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S Form 3811, February 2004 Domestic Re	turn Receipt	102595-02-M-1540	
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P.O. Box 1348			
Artesia, NM 88211-1348 D State NSL		1	
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	Certified Mail Express Mail	for Morshon dia-	
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May 6, 2008

**CERTIFIED RECEIPT RETURN** 

Oil Conservation Division 1220 St. Francis Drive Santa Fe, NM 87504

Attention: Richard Ezeanyim

## Re: Request for Administrative Approval of an Unorthodox Location

Dear Mr Ezeanyim:

Marbob Energy Corporation respectfully requests your consideration of the above referenced. Marbob Energy proposes to drill our D State No. 43 located at 1040' FNL & 1550' FWL of Section 36 in Township 17s, Range 28e as a Yeso test. An unorthodox location is being requested to avoid existing natural gas pipelines in the area. As you will notice the affected units are all part of the D State lease and we have recently drilled our No. 25 in unit C.

To aid in your review of this request, please find enclosed:

- A.) D State No. 43 Form C-102
- B.) Topographic Map of Area
- C.) Plat identifying Pipeline Locations
- D.) Plat identifying Affected/Offset Proration Units
- E.) Verification of Notices

Your attention to this matter is greatly appreciated. Should you have any questions or need further information, please do not hesitate to contact me.

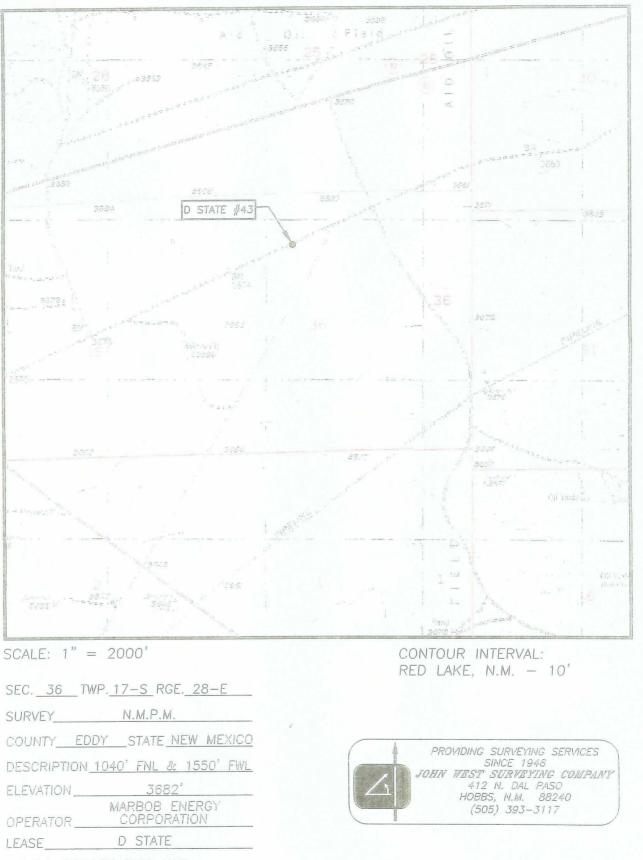
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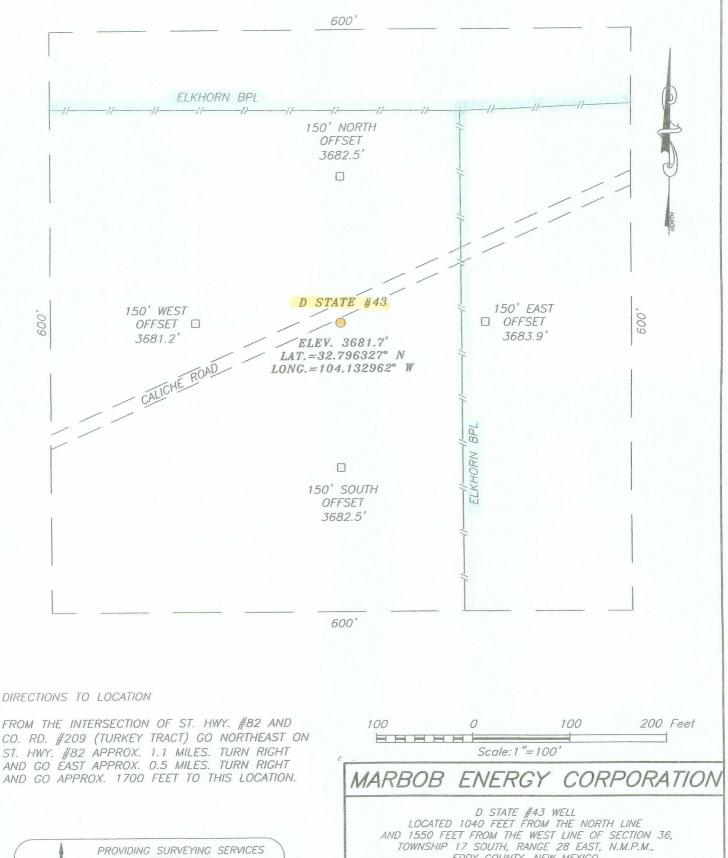
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					Surfac	e Loca	ation			
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									RONALD EIDSON	3239

# LOCATION VERIFICATION MAP



U.S.G.S. TOPOGRAPHIC MAP RED LAKE, N.M. SECTION 36, TOWNSHIP 17 SOUTH, RANGE 28 EAST, N.M.P.M., EDDY COUNTY, NEW MEXICO



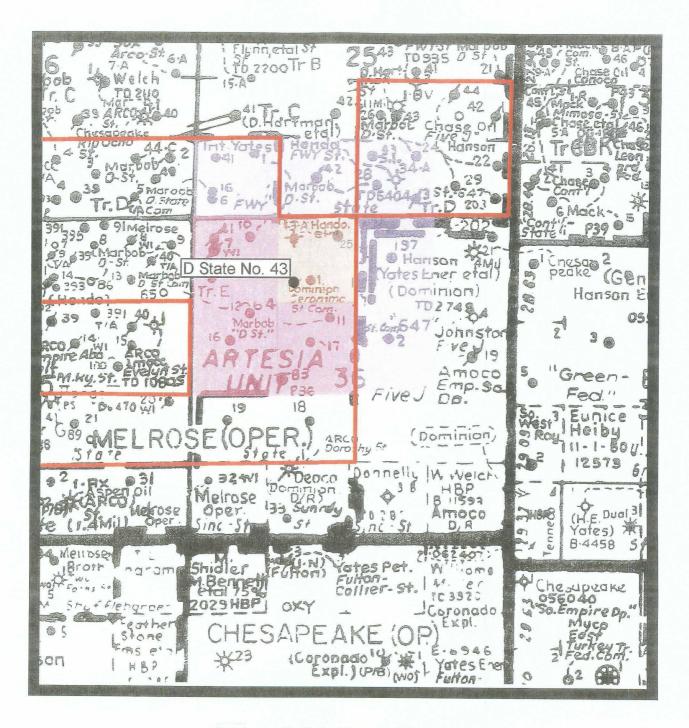
SINCE 1946 **IOHN WEST SURVEYING COMPANY** 412 N. DAL PASO HOBBS, N.M. 88240 (505) 393–3117 

 EDDY COUNTY, NEW MEXICO.

 Survey Date: 4/3/08
 Sheet 1 of 1 Sheets

 W.O. Number: 08.11.0525
 Dr By: LA
 Rev 1:N/A

 Date: 4/7/08
 08110525
 Scale:1"=100'



D State No. 43 Offset Units
D State No. 43 Affected Units
D State No. 43 Proration Unit
D State Lease Boundary

D State Lease Boundary

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DEL	IVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature	Agent
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	B. Received by (Printed Name)	C. Date of Delivery
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Chase Oil Corporation P.O. Box 1767 Artesia, NM 88211-1767		
D State NSL	3., Service Type       1 Certified Mail       □ Fregistered       □ Insured Mail       □ Certified Mail       □ Return Re       □ Insured Mail       □ C.O.D.       4. Restricted Delivery? (Extra Fee)	lail ceipt for Merchandise
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May 6, 2008

## **CERTIFIED RECEIPT RETURN**

Oil Conservation Division 1220 St. Francis Drive Santa Fe, NM 87504

Attention: Richard Ezeanyim

# Re: Request for Administrative Approval of an Unorthodox Location

Dear Mr Ezeanyim:

Marbob Energy Corporation respectfully requests your consideration of the above referenced. Marbob Energy proposes to drill our D State No. 43 located at 1040' FNL & 1550' FWL of Section 36 in Township 17s, Range 28e as a Yeso test. An unorthodox location is being requested to avoid existing natural gas pipelines in the area. As you will notice the affected units are all part of the D State lease and we have recently drilled our No. 25 in unit C.

To aid in your review of this request, please find enclosed:

- A.) D State No. 43 Form C-102
- B.) Topographic Map of Area
- C.) Plat identifying Pipeline Locations
- D.) Plat identifying Affected/Offset Proration Units
- E.) Verification of Notices

Your attention to this matter is greatly appreciated. Should you have any questions or need further information, please do not hesitate to contact me.

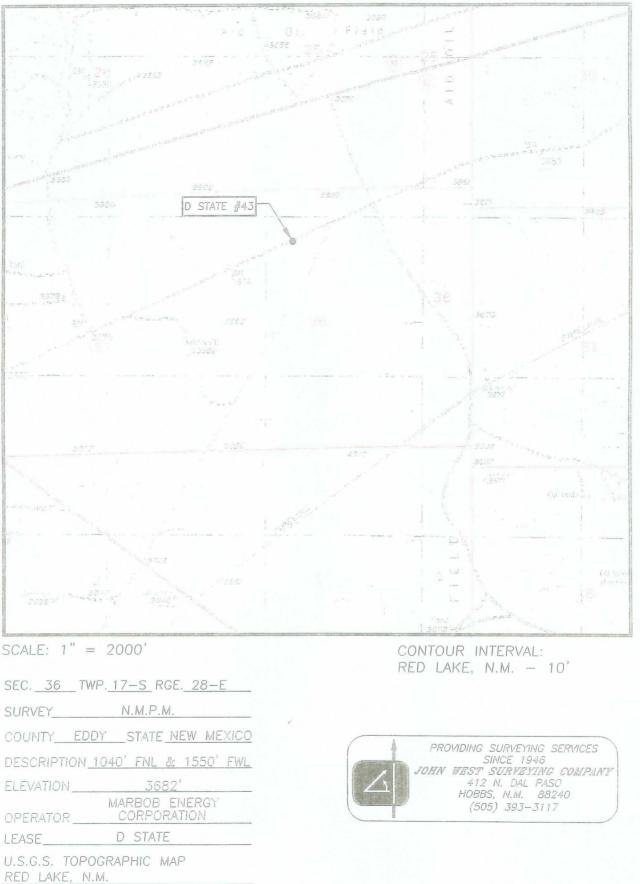
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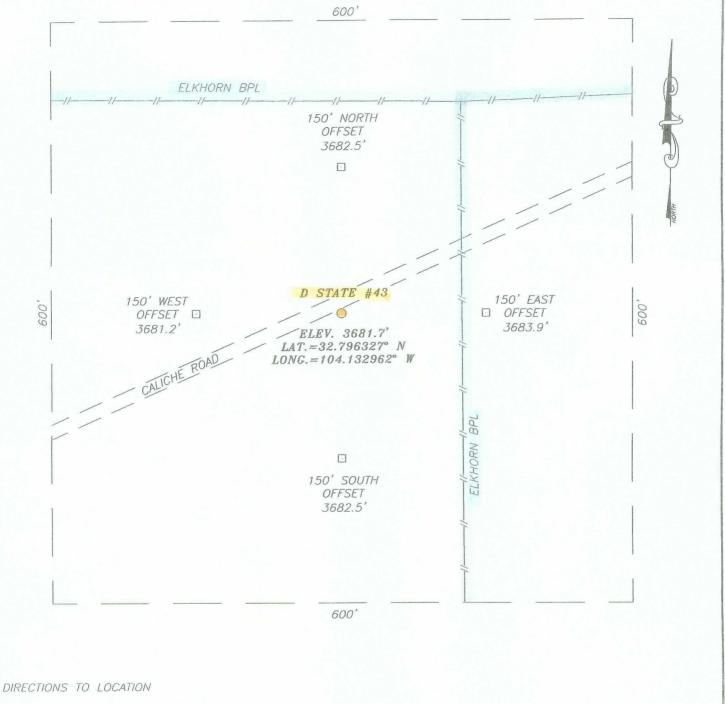
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# LOCATION VERIFICATION MAP

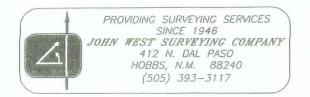


NO.EPT

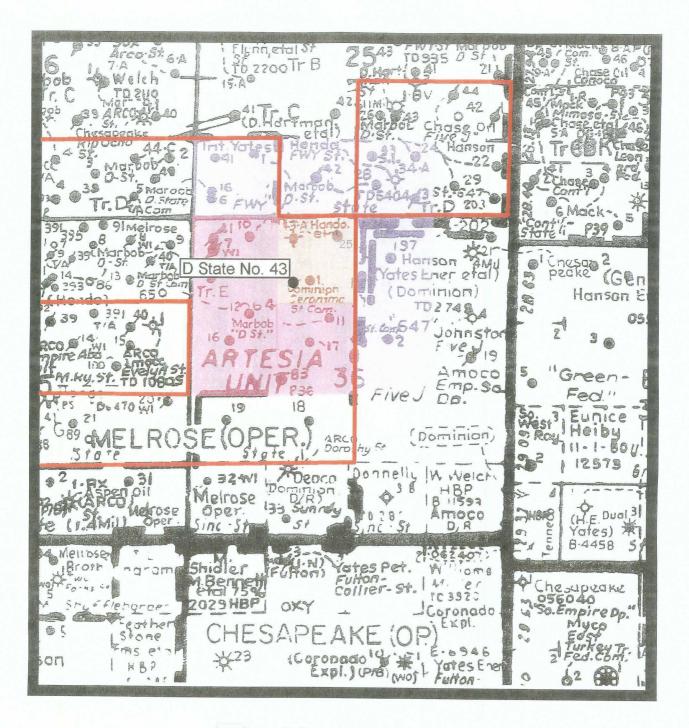
SECTION 36, TOWNSHIP 17 SOUTH, RANGE 28 EAST, N.M.P.M., EDDY COUNTY, NEW MEXICO



FROM THE INTERSECTION OF ST. HWY. #82 AND CO. RD. #209 (TURKEY TRACT) GO NORTHEAST ON ST. HWY. #82 APPROX. 1.1 MILES. TURN RIGHT AND GO EAST APPROX. 0.5 MILES. TURN RIGHT AND GO APPROX. 1700 FEET TO THIS LOCATION.



100 0	100 200 Feet						
Sc	cale:1 "=100'						
MARBOB EN	ERGY CORPORATION						
D STATE #43 WELL LOCATED 1040 FEET FROM THE NORTH LINE AND 1550 FEET FROM THE WEST LINE OF SECTION 36, TOWNSHIP 17 SOUTH, RANGE 28 EAST, N.M.P.M., EDDY COUNTY, NEW MEXICO.							
Survey Date: 4/3/08	Sheet 1 of 1 Sheets						
W.O. Number: 08.11.052.	5 Dr By: LA Rev 1:N/A						
Date: 4/7/08	08110525 Scale: 1"=100'						



D State No. 43 Offset Units
D State No. 43 Affected Units
D State No. 43 Proration Unit
D State Lease Boundary

a batch this card to the back of the mailpice, or on the front if space permits. <ul> <li>B. Received by (Printed Name)</li> <li>C. Date of Delivery or on the front if space permits.</li> </ul> Micro-Actives of to: Marko Actives of to: Nation Actives of to: D. Is dalway address below.              C. Date of Delivery or on the front if space permits.           1. Signification of the back of the mailpice, or on the front if space permits.              2007 1490 0002 5487 3250               Complete items 1, 2, and 3. Also complete items 41 Restricted Delivery address below.              Agent		1997 - 19	a share a start
	item 4 if Restricted Delivery is desired.	-	
	Attach this card to the back of the mailpiece,		
Metrosce Operating Company 10000 Wildshine Bild Stee 223 Oklahoma City, OK 73116-7003       Image Mail         Dotatie NSL       Image Mail       Depress Mail         Image Mail       Conjunct Mail       Conjunct Mail         Prof. your rank all obd       7007 1.450       Domestic Return Receipt       Conjunct Mail         Image Mail       Conjunct Mail       Depress Mail       Depress Mail         Image Mail       Conjunct Mail       Depress Mail       Depress Mail         Image Mail       Conjunct Mail       Depress Mail       Depress Mail         Image Mail       Conjunct Mail       Conjunct Mail       Depress Mail         Image Mail       TOD7 1.450       Depress Mail       Depress Mail         Image Mail       Colume Conjunct       No       Mail Colume       Depress Mail         Image Mail       TOD7 1.450       Depress Mail       Depress Mail       Depress Mail         Image Mail       Colume Colume       Colume Colume       Depress Mail       Depress Mail         Image Mail       Colume Colume       Depress Mail       Depress Mail </td <td>or on the front if space permits.</td> <td></td> <td></td>	or on the front if space permits.		
Artice Number     Artice Nume     Artice Number     Artice Number     Artice Number     Artice N	1000 W Wilshire Blvd Ste 223 Oklahoma City, OK 73116-7003		
2. Article Number       7007       14 43       000000000000000000000000000000000000	·	Cortified Mall     Express Mail     Registered     Redurn Receip     Insured Mall     C.O.D.	
Sender to this section on determine the adjust of the malpice, or on the forth space permits and address on the reverse is of the determine and address on the reverse is of the determine the adjust of the malpice, or on the forth space permits.  A. Signature  A. Sign	2. Article Number (Transfer from service label) 7007 147	0 0002 5487 3250	;
	PS Form 3811, February 2004 Domestic Res	turn Recelpt	102595-02-M-1540
Article Addressed to:  Article Addressed to	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature	☐ Agent ☐ Addressee
D State NSL         3. Service Type         4. Restricted Delivery (Extra Fee)         4. Restricted Delivery is desired.         6. Received by (Printed Name)         C. Date of Delivery         6. Received by (Printed Name)         C. Date of Delivery         Chase Oil Corporation         P.O. Box 1767         Artesh NSL         2. Article Number         (Paster Mail)         Complete Items 1, 2, and 3. Also complete         Breader for Marchandise         Insured Mail       C. C. Det of Delivery         Chase Oil Corporation         P.O. Box 1767         Artesh Kast for Marchandise         Insured Mail       C. O.D.	or on the front if space permits.  1. Article Addressed io: Hanson Energy P.O. Box 1348	D, is delivery address different from item	1?   Yes
(Prender from service label)       YULY 1490       DDD2 5487 3365         PS Form 3811, February 2004       Domestic Return Receipt       2595-62-M-1540         SENDER: Complete items 1, 2, and 3, Also complete item 4 if Restricted Delivery is desired.       A. Signature       A. Agent         Print your name and address on the reverse so that we can return the card to you.       A. Received by (Printed Name)       C. Date of Delivery         a. Attach this card to the back of the mailpiece, or on the front if space permits.       D. Is delivery address different from item 17       Visit         1. Article Addressed to:       Ne       Ne       Ne         Chase Oil Corporation P.O. Box 1767       Ass211-1767       Service Type       Could be shown the reverse so that we can return the address on the reverse so that we can return the card to you.       A. Restricted Delivery? (Extra Fee)       Yes         2. Article Number       7007       1.490       D002       5487       3373         PS Form 3811, February 2004       Domestic Return Receipt       102595-02-44-1540       A. Signature       A. Signature         Complete items 1, 2, and 3, Also complete the mailpice, or on the front if space permits.       Print your name and address on the reverse so that we can return the card to you.       A. Signature       A. Signature         Print your name and address on the reverse so that we can return the card to you.       A. Signature       A. Signat	-	Certified Mail Express Mail Registered Breturn Recei Insured Mail C.O.D.	pt for Merchandise
PS Form 3811, February 2004       Domestic Return Receipt	2. Article Number (Transfer from service lebel) 7007 14		
1. Article Addressed to:       If YES, enter delivery address below:       No         1. Article Addressed to:       If YES, enter delivery address below:       No         2. Article Number (Transfer from service label)       7007       1490       0002       5487       3373         2. Article Number (Transfer from service label)       7007       1490       0002       5487       3373         PS Form 3811, February 2004       Domestic Return Receipt       102595-02-M-1540       102595-02-M-1540         SENDER: COMPLETE THIS SECTION       Complete items 1, 2, and 3, Also complete them 4 if Restricted Delivery is desired.       Agent         Print your name and address on the reverse so that we can return the card to you.       Agent       Addressee         B. Rocolved by (Printed Name)       C. Date of Delivery O. Is delivery address different from Item 17       Ves If YES, enter delivery address below:         1. Article Addressed to:       No       No         Attach this card to the back of the malipiece, or on the front if space permits.       7         1. Article Addressed to:       No         Attach thum Beack of the malipiece, or on the front if space permits.       7         1. Article Addressed to:       No         Attach thum Receipt for Marchandise       No         7       SeptGe Type         9       Sepress	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature X B. Received by ( <i>Printed Name</i> )	Agent Addressee C. Date of Delivery
P.O. Box 1767 Artesia. NM 88211-1767 D State NSL         1. Article Number (Transfer from service label)         ? OT 1490         ? Article Number (Transfer from service label)         ? OT 1490         ? OT 1490         PS Form 3811, February 2004         Domestic Return Receipt         ************************************			
(Transfer from service label)       ?UU? 1490 0002 5487 3373         PS Form 3811, February 2004       Domestic Return Receipt       10255-02-44-1540         SENDER: COMPLETE THIS SECTION       COMPLETE THIS SECTION ON DELIVERY       A Signature         Complete items 1, 2, and 3. Also complete them 4 if Restricted Delivery is desired.       A Signature       A Agent         Print your name and address on the reverse so that we can return the card to you.       B. Received by (Printed Name)       C. Date of Delivery         Attach this card to the back of the malipiece, or on the front if space permits.       D. Is delivery address different from Item 17       Yes         1. Article Addressed to:       Attr.: J.P. Addams, Room 6.19       P         BP America Production Co. 501 Westlake Park Blvd. Houston, TX 77079       Septice Type       D State NSL         2. Article Number       C.D.D.       Septice Type       P Setting Mail         2. Article Number       DEEDE 1487 3380	P.O. Box 1767 Artesia. NM 88211-1767	Certified Mall	
SENDER: COMPLETE THIS SECTION         © Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.         Print your name and address on the reverse so that we can return the card to you.         ■ Attach this card to the back of the mailpiece, or on the front if space permits.         1. Article Addressed to:         Attrn: J.P. Adams, Room 6.1         P America Production Co. 501 Westlake Park Blvd. Houston, TX 77079         D State NSL         2. Article Number		Insured Mail C.O.D.	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.   Print your name and address on the reverse so that we can return the card to you.   Attach this card to the back of the mailpiece, or on the front if space permits.   1. Article Addressed to:   Attn: J.P. Adams, Room 6.1   PF America Production Co. 501 Westlake Park Blvd. Houston, TX 77079 D State NSL   2. Article Number   2. Article Number Anticle Number Article Number		Insured Mail C.O.D.  Restricted Delivery? (Extra Fee)	
1. Article Addressed to:       D. is delivery address different from item 17       Yes         Attn: J.P. Adams, Room 6.197         BP America Production Co.         501 Westlake Park Blvd.         Houston, TX 77079         D State NSL         2. Article Number	(Transfer from service label) / U 0 7 1	Insured Mail C.O.D.  A. Restricted Delivery? (Extra Fee)  90 0002 5487 3373	☐ Yes
Attn: J.P. Adams, Room 6.197 BP America Production Co. 501 Westlake Park Blvd. Houston, TX 77079 D State NSL 2. Article Number 2. Article	(Transfer from service label) 2007 LL PS Form 3811, February 2004 Domestic R SENDER: COMPLETERTHIS SECTION Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	Insured Mail C.O.D.  Restricted Delivery? (Extra Fee)  PD DDD2 5487 3373  eturn Receipt  COMPLETE THIS SECTION ON DELIV  A. Signature  X	Yes     102595-02-M-1540     Agent     Addressee
7007 3080 0002 5987 3700	(Transfer from service label)       ? ЦЦ?       L         PS Form 3811, February 2004       Domestic R         SENDER: COMPLETE THIS SECTION         © Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.         Print your name and address on the reverse so that we can return the card to you.         Attach this card to the back of the mailpiece, or on the front if space permits.	Insured Mail C.O.D.  A. Restricted Delivery? (Extra Fee)  ODD2 5487 3373  eturn Receipt  ComPLETE THIS SECTION ON DELI A. Signature  B. Received by (Printed Name)  D. Is delivery address different from item	Yes Yes 102595-02-M-1540 Agent Addressee C. Date of Delivery Yes Yes
	<ul> <li>(Transfer from service label)</li> <li>PS Form 3811, February 2004</li> <li>Domestic R</li> <li>SENDER: COMPLETENTIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Attach this Card to the back of the mailpiece.</li> <li>Attach this card to the back of the mailpiece.</li> <li>Attach this card to the back of the mailpiece.</li> <li>Attach this card to the back of the mailpiece.</li> <li>Attach BP America Production Co.</li> <li>501 Westlake Park Blvd.</li> <li>Houston, TX 77079</li> </ul>	Insured Mail C.O.D.  A. Restricted Delivery? (Extra Fee)  C. Rescricted Delivery? (Extra Fee)  C. Is delivery address different from Item If YES, enter delivery address below  C. Is delivery address different from Item If YES, enter delivery address below  Registered Registered Return Recel Insured Mail C.O.D.	Yes  Yes  102595-02-M-1540  Agent Addressee C. Date of Delivery  Yes No  for Merchandise

DISTRICT I P.O. Box 1960, Hobbs, NM 88241-1960

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

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

DISTRICT IV P.O. BOX 2008, SANTA FE, N.M. 87504-2088 State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-102 Revised February 10, 1994 Submit to Appropriate District Office State Lease - 4 Copies Fcc Lease - 3 Copies

## OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

□ AMENDED REPORT

API Number				Pool Code			Pool Name		·	
30-015-30978						ARTESTA OU	EEN GRBG SA	GLORIETTA Y	ESO	
Property Code					Property N			Well Num		
		"T	" STATE	2			25			
OGRID No					Operator Na			Blevatio	n	
14049				MARBOE	B ENERGY	CORPORATION		3688	3	
Surface Location										
									County	
		-	-			NORTH	2210	East/West line WEST	EDDY	
L L										
			Bottom	Hole Lo	cation If Dif	ferent From Sur	face			
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
Dedicated Acres	Joint o	r Infill	Consolidation (	Code Or	der No.				· · · · · · · · · · · · · · · · · · ·	
40										
		בודים ביוויים האמר זוויים	ASSIGNED '	TO THIS	COMPLETION	UNTIL ALL INTER	FSTS HAVE BI	TEN CONSOLID		
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							bast of my know	viedge and belief.		
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							2/1	7/00		
							Date			
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							I hereby certin	, that the well locat	ion shown	
								as plotted from field	t notes of	
							supervison, an	made by me or al that the same is	under my	
	•				,		correct to th	a best of my belia	<i>r</i> .	
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								MACON MCDONAL	D 12185	
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#### <u>District I</u>

1625 N. French Dr., Hobbs, NM 88240 Phone:(505) 393-6161 Fax:(505) 393-0720

#### <u>District II</u>

1301 W. Grand Ave., Artesia, NM 88210 Phone:(505) 748-1283 Fax:(505) 748-9720

#### District III

1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

#### <u>District IV</u>

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

# State of New Mexico Energy, Minerals and Natural Resources

## 1220 S. St Francis Dr.

Santa Fe, NM 87505

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

	. API Number	2. Pool Code	3. Pool Name		
	D-015-35869	96830	ARTESIA; GLORIETA-YESO (O)		
4.	Property Code	5. Property Name		6. Well No.	
	25375	D STATE		025	
7	. ogrid no. 14049	8. Opera MARBOB EN		9. Elevation 3688	

				10. \$	surface Loc	ation			
UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
C	36	17S	28E	C	330	N	2210	W	EDDY

### 11. Bottom Hole Location If Different From Surface

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
	dicated Acres 40.00	13.	Joint or Infill	14	. Consolidation	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

## OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

E-Signed By: Diana Briggs Title: Production Analyst Date: 10/17/2007

## 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 belief. Surveyed By: Ronald Eidson Date of Survey: 2/8/2000 Certificate Number: 3239