

District I
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Phone: (575) 393-6161 Fax: (575) 393-0720
District II
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Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

HOBBS OCD

State of New Mexico

Energy, Minerals & Natural Resources Department

AUG 22 2016

OIL CONSERVATION DIVISION

RECEIVED

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-06976		² Pool Code 49210	³ Pool Name PADDOCK
⁴ Property Code 32449	⁵ Property Name E O CARSON		⁶ Well Number 2
⁷ OGRID No. 019958	⁸ Operator Name STEPHENS & JOHNSON OPERATING CO		⁹ Elevation 3490' GL

¹⁰ Surface Location

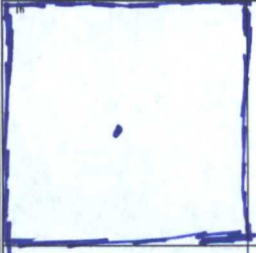
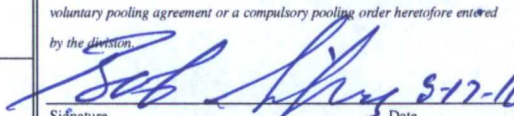
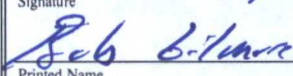
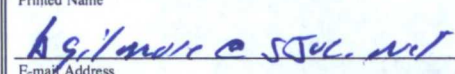
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	33	21 S	37 E		660'	N	660'	W	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	33	21 S	37E		660'	N	660'	W	LEA

¹² Dedicated Acres 40	¹³ Joint or Infill N	¹⁴ Consolidation Code NA	¹⁵ Order No. NA
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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.

				¹⁷ 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 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.  Signature _____ Date 8-17-16
				 Printed Name Bob B. Lane
				 E-mail Address Bob.B.Lane@STJL.net
				¹⁸ 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. Date of Survey _____ Signature and Seal of Professional Surveyor: _____ Certificate Number _____