

ORIGINAL ON FILE

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-039-07960		² Pool Code 96175		³ Pool Name WILDCAT ROSA PICTURED CLIFFS	
⁴ Property Code 008480		⁵ Property Name ROSA			⁶ Well Number #18
⁷ OGRID No. 016189		⁸ Operator Name NORTHWEST PIPELINE CORPORATION			⁹ Elevation 6254'

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
H	22	31N	06W		1470'	NORTH	800'	EAST	RIO ARRIBA

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

¹² Dedicated Acres NE-160	¹³ Joint or Infill I	¹⁴ Consolidation Code	¹⁵ Order No.
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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

<div data-bbox="203 1676 535 1932"> <p>RECEIVED OCT - 3 1994 OIL CON. DIV. DIST. 3</p> </div>	<div data-bbox="852 1149 990 1308"> <p>1470'</p> <p>800'</p> </div>				<div data-bbox="1096 1027 1464 1059"> <p>¹⁷ OPERATOR CERTIFICATION</p> </div> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Mark McCallister</i> Signature</p> <p>MARK MCCALLISTER Printed Name</p> <p>SR. ENGINEER Title</p> <p>September 30, 1994 Date</p>
	<div data-bbox="1096 1506 1464 1538"> <p>¹⁸ SURVEYOR CERTIFICATION</p> </div> <p>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.</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor:</p> <p>Certificate Number</p>				