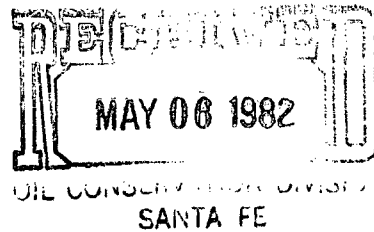




207 SOUTH FOURTH STREET
ARTESIA, NEW MEXICO 88210

TELEPHONE (505) 748-1331



S. P. YATES
PRESIDENT
MARTIN YATES, III
VICE PRESIDENT
JOHN A. YATES
VICE PRESIDENT
B. W. HARPER
SEC. TREAS.

April 21, 1982

1526
NSL
Rule 104F
5-26-82

Mr. Joe D. Ramey, Secretary-Director
New Mexico Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501

Re: Sacra "SA" #4
Fee Lease
330' FSL - 660' FEL
Section 35-T6S-R25E
Chaves County, New Mexico

Dear Sir,

Yates Petroleum Corporation would appreciate an administrative approval for a proposed unorthodox Abo gas well location as provided for under NMOCD Rule 104F.

The enclosed map shows the topography in the SE quarter of section 35. Our preferred location is 660' FWL and 660' FEL. As can be seen on the map, it falls in Fivemile Draw. The next best location for us is 330' FSL and 660' FEL. Thus, we are requesting administrative approval for this location for topographic reasons.

The following are the formations we expect to drill through:

San Andres Glorieta Abo

The Land Map shows the two offset operators notified by certified mail of our request.

We will appreciate your expeditious approval and issuance of the administrative order.

Sincerely,

Gliserio Rodriguez
Regulatory Manager
YATES PETROLEUM CORPORATION

GR/dw

enclosures

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

MAY 08 1982

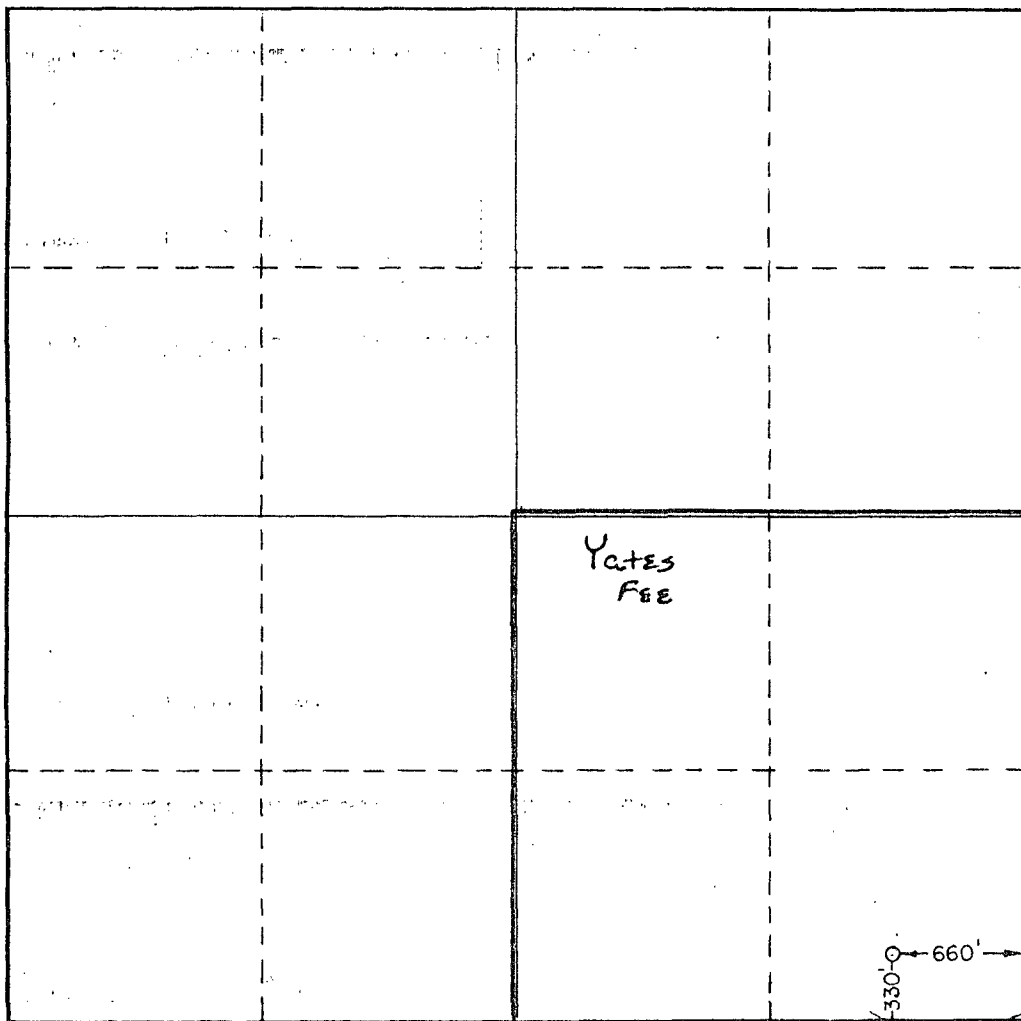
Operator YATES PETROLEUM CORPORATION			Lease Sacra "SA" OIL CON			Well No. 4
Unit Letter P	Section 35	Township 6 South	Range 25 East	County SANTA FE		
Actual Footage Location of Well: 330 feet from the South line and 660 feet from the East line						
Ground Level Elev. -3686.2'	Producing Formation Abo		Pool Pecos Slope Abo		Dedicated Acreage: 160 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.

Gliserio Rodriguez
Name

Gliserio Rodriguez
Position

Regulatory Manager
Company

Yates Petroleum Corp.
Date

5/3/82

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

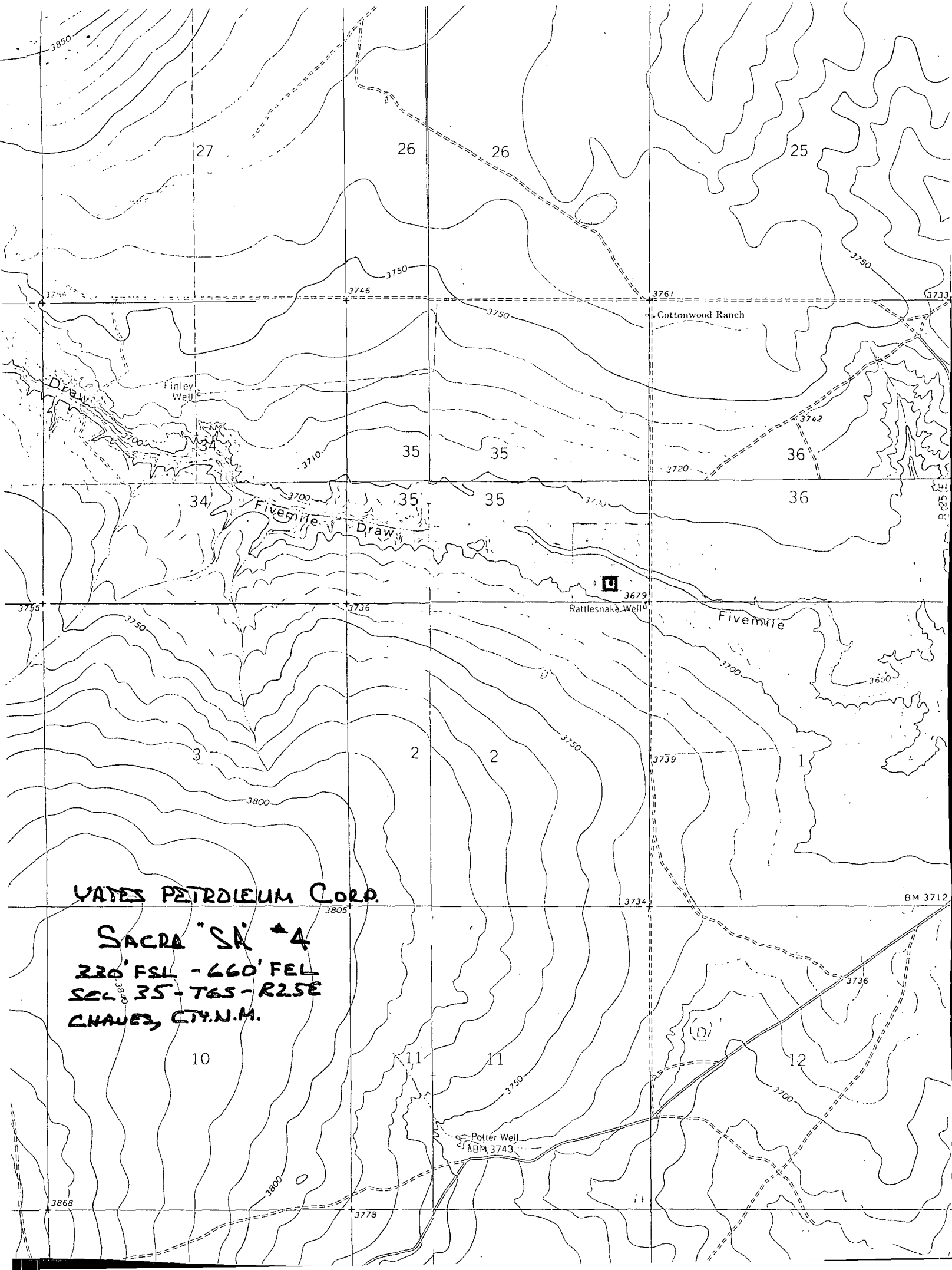
April 24, 1982

Registered Professional Engineer and/or Land Surveyor

Day 29 82
Certificate No.

7977

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0



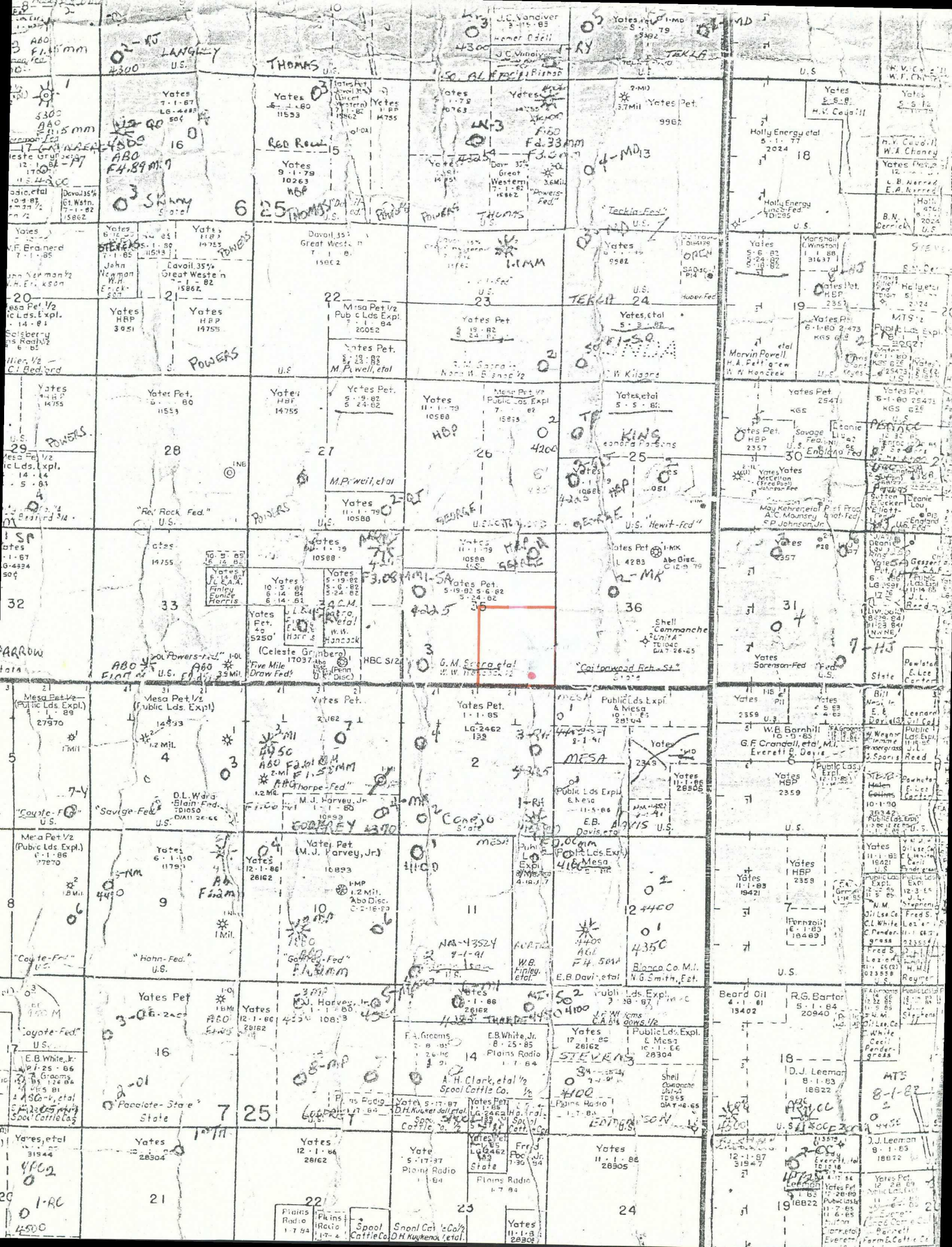
YATES PETROLEUM CORP.

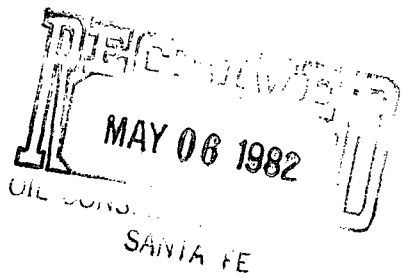
SACRA "SA" #4

230' FSL - 660' FEL

SEC 35 - T6S - R25E

CHAVEZ, CTY. N.M.





P23 8868191

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

PS Form 3800, Apr. 1976

SENT TO		CERTIFIED FEE		POSTAGE	
STREET AND NO.		c		\$	
4835 181st Street, Suite 235		c			
P.O. STATE AND ZIP CODE		c			
Dallas, Texas 75234		c			
CONSULT POSTMASTER FOR FEES		c			
OPTIONAL SERVICES		c			
RETURN RECEIPT SERVICE		c			
SHOW TO WHOM AND DATE DELIVERED		c			
SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY		c			
TOTAL POSTAGE AND FEES		c		\$	
POSTMARK OR DATE		c		5/3/82	

P23 8868192

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
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(See Reverse)

PS Form 3800, Apr. 1976

SENT TO		CERTIFIED FEE		POSTAGE	
STREET AND NO.		c		\$	
11000 181st Street, Suite 235		c			
P.O. STATE AND ZIP CODE		c			
Midland, Texas 79710		c			
CONSULT POSTMASTER FOR FEES		c			
OPTIONAL SERVICES		c			
RETURN RECEIPT SERVICE		c			
SHOW TO WHOM AND DATE DELIVERED		c			
SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY		c			
TOTAL POSTAGE AND FEES		c		\$	
POSTMARK OR DATE		c		5/3/82	