NF 1EXICO OIL CONSERVATION COMMISSIC WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | All distances must be f | rom the outer boundaries of | the Section. | |
|---|---------------|-------------------------|-----------------------------|---|--|
| Operator | | | Lease | | Well No. |
| DEFOC INC. | | FRIERA | | 2 | |
| | ection | Township | Range | County | |
| n | 19 | 1) South | 28 Wast | Cha | Ves |
| Actual Footage Location of Well: | | | | | |
| 590 i | feet from the | North line and | 990 fee | et from the Wes | t line |
| Ground Level Elev: | Producing For | | Pool | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Dedicated Acreage: |
| 3625 | San And | ires | Wildcat | | 42.43 |
| | 1 1 | . 11 . 1 | | 1 1 1 | 10 / Heres |
| 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 | | | | | |
| les 10 It 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. | | | | | |
| - | | n de m | | | CERTIFICATION |
| | 1 | R 28 E | 1 | | CERTIFICATION |
| | 1 | | ĺ | | |
| 9 | | | 1 | I hereby | certify that the information con- |
| | | | 1 | tained he | erein is true and complete to the |
| | | | | best of n | ny knowledge and belief. |
| 990 | 2 | | | | |
| | ~ | | i i | | |
| | | | | Nome | 1 . |
| | 1 | | 1 | 2131 | R. Mason |
| | í. | | | Position | |
| | | | 1 | Cha | ef Clark |
| | | | | Company | |
| | i | | 1 | DEF | CO, Inc. |
| | | | 1 | Date | |
| | 1 | | 1 | <u> </u> | 9-13 |
| | | | | | |
| 1 | | | | | |
| | 1 | | 1 | I hereby | certify the the North accition |
| | 1 | | | | this plat was alone in feet from field |
| | 1 | | i I | notes of | actual surveys made by me or |
| | Ì | | 1 | | supervision, and that the same |
| | | | 1 | | and correct to the best of my |
| | i | | † | i I | ge and belief |
| | | | | | S. S. K. W. |
| | | | _ | | CO H BROW |
| | l t | | ↓ | Date Surve | • |
| | 1 | | | Fabrui | · <u> </u> |
| | 1 | | 1 | Registered and/or Lan | Professional Engineer |
| | l i | | 1 | and/or Lan | a surveyor |
| | | | | - Jan | Medical |
| 0 330 660 '90 | 1320 1650 19 | 80 2310 2640 2000 | 1500 1000 | Čertificate | No. |