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

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 Fee Lease - 3 Copies

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

DISTRICT IV

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

P.O. BOX 2088, SANTA FE. N.M. 87504-2088

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

XX AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-30935	Pool Code 59860		Pool Name Travis Upper Pennsylvanian				
Property Code 14021	Pro SAMU	Well Number					
OGRID No.		rator Name I OIL COMPANY	Elevation 3554				

Surface Location

1	UL or lot No.	Section	Township	Range	Lot idn	Feet from the	North/South line	Feet from the	East/West line	County
1	В	34	18 S	28 E		450	NORTH	2100	EAST	EDDY

Bottom Hole Location If Different From Surface

Γ	UL or	lot	No	·	Section	Township	Range	Lot ldn	Feet from the	North/South line	Feet from the	East/West line	County
					j								
T	Dedica	ted	1 A	сгев	Joint of	r Infill (Consolidation	Code Or	der No.				
	80-	-W/	/2.	,NE	14	•			. <u></u>				

NO ALLOWARIE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED

I hereby certify the the information contained herein is true and complete to best of my knowledge and belief Mathematical Contained herein is true and complete to best of my knowledge and belief	NO ALLOWABLE WI	NO	ИО) AI	LLC	.O W	VA B	BLE	: W	ILL (BE OR	E / A	ASS NC	SIG. DN-	NE ST	D 1 'AN!	DAR	THI :D	S (UN	COM IT	APLI HAS	ETIO BE	EN L	APF	L A PROV	VED	NTE BY	TH	E	TS HAVE BEEN CONSOLIDATED DIVISION
Drilling Superintender Title 10/8/98 Date SURVEYOR CERTIFICATION I hereby certify that the well location st on this plat was plotted from field not actual surveys made by me or unde supervisor, and that the same is true correct to the best of my belief. SEPTEMBER 30, 1998 Date Surveyed. Signature & Soal of Professional Surveyor. Professional Surveyor.	• #2	-		#:	2						OR		`	_	ST	AN	DAR	. <u>D</u>	. 1	<u> </u>	HAS	BE	1		PROV	VED	BY	TH		OPERATOR CERTIFICATION / hereby certify the the information contained herein is true and complete to the best of my knowledge and belief Wally