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DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artonia, NM 88210

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

## State of New Mexico Energy, Minerals and Natural Resources Department

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## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

## WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

| perator<br>MYC     | O INDUST   | RIES INC.                                |                                    |                               | Lease                            | and Dune S         | State             |                                  | Well No.                              |             |
|--------------------|--|--|------------------------------------|-------------------------------|----------------------------------|--------------------|-------------------|----------------------------------|---------------------------------------|-------------|
| nit Lotter         | Section  | Towns                                    | hin                                |                               | Range                            |                    |                   | County                           | l                                     | ,<br>       |
| L                  |  | 1  | 19 S                               | outh                          |                                  | East               |                   | Ed                               | ldy                                   |             |
| tual Footage Loo   | ation of Well:   | l  |                                    |                               | L                                |                    | NMPM              | L                                |                                       |             |
| 1980               | feet from th   |  |                                    | line and                      | 660                              |                    | feet from         | the West                         | line                                  |             |
| ound level Elev.   |  | Producing Format                         | io <b>n</b>                        |                               | Pool                             |                    |                   |                                  | Dedicated Acre                        | age:        |
| 3388.5             |  | QUEEN                                    |                                    |                               | TURKEY                           | TRACK SR-          | -Q-G-SA           |                                  | 40                                    | Acres       |
|                    |  |  |                                    |                               |                                  | mership thereof (t |                   |                                  |                                       | ter med con |
| unitiz<br>If answe | ation, force-pos<br>Yes<br>r is "no" list th           | oling, etc.?<br>No<br>se owners and trac | if answe                           | r is "yes" typ                | e of consolidat                  |                    |                   | -                                |                                       |             |
| No allow           | a if neccessary.<br>rable will be as<br>a non-standard |  | l until all inte<br>such interest, | rests have be<br>has been app | en consolidate<br>roved by the D | l (by communitizz  | tion, unitization | , forced-poolin                  | g, or otherwise)                      |             |
|                    |  |  | <b>_</b>                           |                               |                                  | 1                  |                   | OPERAT                           | OR CERTIFI                            | CATION      |
|                    | 1  |  |                                    |                               |                                  | 1<br>1             |                   | I hereby                         | certify that t                        | he informa  |
|                    |  |  |                                    |                               |                                  |                    | Ci<br>  bi        | ontained herei<br>est of my know | in in true and a<br>ledge and belief. | complete to |
|                    |  |  |                                    |                               |                                  | 1                  | 5                 | ignature                         | li                                    |             |
|                    | l  |  |                                    |                               |                                  | ĺ                  | P                 | $M, \mathcal{U}_{i}$             | Shear                                 | úÐ          |
|                    |  |  |                                    |                               |                                  |                    |                   | W.A. GR                          | ESSETT                                |             |
|                    | 1  |  |                                    |                               |                                  | Ì                  |                   | CONSULT                          | ANT                                   |             |
|                    |  |  |                                    |                               |                                  | 1                  |                   | ompeay<br>MYCO IN                | DUSTRIES,                             | TNC.        |
|                    |  |  |                                    |                               |                                  | l                  | ם                 | ate                              |                                       |             |
|                    | 1  |  |                                    |                               |                                  |                    |                   | 9/12                             | /90                                   |             |
|                    |  |  |                                    |                               |                                  | {<br><del> </del>  |                   | SURVEY                           | OR CERTIF                             | CATION      |
|                    |  |  |                                    |                               |                                  | 1                  | I                 | hereby certif                    | y that the well<br>as plotted from    | location sh |
|                    |  |  |                                    |                               |                                  |                    | a   a             | ctual surveys                    | made by me                            | or under    |
| -660'-9            | F  |  |                                    |                               | PROFE                            | SIDA               |                   |                                  | d that the sen<br>best of my          |             |
|                    | í  |  |                                    |                               | E LAND                           | URIA               |                   | elief.                           | , were all with                       | www.aage    |
|                    |  |  |                                    |                               | NO NO                            | 21211              |                   | Date Surveyed                    | 1/9/90                                |             |
|                    |  |  |                                    |                               |                                  |                    | <b>[ ]</b>        | Signature & Se                   | alof                                  |             |
| 980'-              |  |  |                                    | //ª                           | NEW M                            |                    | '     ]           | Professional Su                  | rveyor                                |             |
| <u>6</u>           | <br> <br>  |  |                                    |                               | VOHN V                           | WES                |                   | Am                               | , W/u                                 | 1st         |
|                    | Ì  |  |                                    |                               |                                  | i                  |                   | Zertificate No.                  | JOHN W. WE                            | ST, 6       |
| L                  |  |  |                                    |                               |                                  | L                  |                   | -                                | INALD J EIDS                          | ON, 32      |