State of New Mexico Eu. _y, Minerals & Natural Resources Department

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

1 API Number

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, NM 87504-2088

Form C-102 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

_	l	
	AMENDED	REPORT
		MUI OIL

WELL LOCATION AND ACREAGE DEDICATION PLAT

² Pool Code

30-015-10336			
4 Property Code 5 Property Name 6 Well Number 6411 North Indian Basin Unit 2 7 OGRID No. 8 Operator Name 9 Elevation GL:3785 UL or lot no. Section Township Range Lot. Idn Feet from the North/South Line Feet from the East/West line County G 11 21-S 23-E 1650 North 1650 East Eddy			
7 OGRID No. 8 Operator Name 9 Elevation 9 Elevati			
UL or lot no. Section Township Range Lot. Idn Feet from the North/South Line Feet from the East/West line County G 11 21-S 23-E 1650 North 1650 East Eddy			
Surface Location UL or lot no. Section Township Range Lot. Idn Feet from the North/South Line Feet from the East/West line County			
UL or lot no. Section Township Range Lot. Idn Feet from the North/South Line Feet from the East/West line County G 11 21-S 23-E 1650 North 1650 East Eddy			
G 11 21-S 23-E 1650 North 1650 East Eddy			
Last Eddy			
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 13 Joint or Infill 14 Consolidation Code 15 Order No.			
320			
NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED			
OR A NONSTANDARD UNIT HAS BEEN APPROVED BY THE DIVISION			
17 OPERATOR CERTIFICATION			
I hereby certify that the information contained herein is			
true and complete to the best of my knowledge and belief.			
1650'			
2. J. Douald			
#2 Signature V			
1650' L.J. Oswald Printed Name			
Operations Superintendent			
Title			
11-30-94			
Date			
18 SURVEYOR CERTIFICATION			
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.			
Date of Survey			
Signature and Seal of Professional Surveyer:			

Certificate Number