| NUMBER O. COPI  | La HECEIVES |  |  |  |  |  |  |  |
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| SANTA FE        |             |  |  |  |  |  |  |  |
| FILE            |             |  |  |  |  |  |  |  |
| U.S.G.S         |             |  |  |  |  |  |  |  |
| LAND OFFICE     |             |  |  |  |  |  |  |  |
| TRANSPORTER     | OIL         |  |  |  |  |  |  |  |
|                 | GA3         |  |  |  |  |  |  |  |
| PROBATION OFFIC |             |  |  |  |  |  |  |  |
| OPERATOR        |             |  |  |  |  |  |  |  |

### NEW MEXICO OIL CONSERVATIL COMMISSION

FORM C-128 Revised 5/1/57

# WELL LOCATION AND ACREAGE DEDICATION PLAT

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

| OPERATOR   |                                   |                                  |                 |             |   |                  |                          |  |  |  |
|--|-----------------------------------|----------------------------------|-----------------|-------------|---|------------------|--------------------------|--|--|--|
| SECTION A  |                                   |                                  |                 |             |   |                  |                          |  |  |  |
| Operator   |                                   |                                  | Lease Wills     |             |   |                  | Well No.                 |  |  |  |
| Larber   | -ti are.                          |                                  |                 |             | <u>derai</u>                                  |                  | 43                       |  |  |  |
| Unit Letter  | Section                           | Township                         | Range           |             | County  |                  |                          |  |  |  |
| <u>(</u>   |                                   | 20                               | 3               | <u>E</u>    |   |                  |                          |  |  |  |
| Actual Footage L   |                                   |                                  | ,               | 32 6        |   |                  |                          |  |  |  |
| Ground Level Ele   | feet from the<br>v. Producing Fo  | <u>outh</u> line an              | Pool            | 37 fe       | et from the                                   | e# <b>t</b>      | line                     |  |  |  |
|  |                                   |                                  | FODI            |             |   |                  | icated Acreage:          |  |  |  |
| 3250 24  | 1316                              | <u>lensi.Q</u>                   |                 | <u></u>     | 11  |                  | Acres                    |  |  |  |
| 1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES NO, ("Ouner" means the person |                                   |                                  |                 |             |   |                  |                          |  |  |  |
|  |                                   | to produce from any po           |                 |             |   |                  |                          |  |  |  |
|  | -<br>-3–29 (e) NMSA 193           |                                  | ••              | *           |   |                  |                          |  |  |  |
| 2. If the answer t   | to question one is "              | no," have the interest           | s of all the ov | wners been  | consolidated                                  | by communitizati | on agreement or other-   |  |  |  |
|  |                                   | answer is "yes," Typ             |                 |             |   |                  |                          |  |  |  |
| 3. If the answer t   | to question two is "              | no," list all the owner          | s and their re  | spective in | terests below:                                | :                |                          |  |  |  |
| Owner  | ··· ··· ··· ··· ··· ··· ··· ··· · |                                  | I               | and Descri  | ption   |                  |                          |  |  |  |
|  |                                   |                                  |                 |             |   | ,, ·             |                          |  |  |  |
|  |                                   |                                  |                 |             |   |                  |                          |  |  |  |
|  |                                   | SECTION B                        |                 |             |   |                  | TIFICATION               |  |  |  |
|  |                                   |                                  |                 |             |   |                  |                          |  |  |  |
|  |                                   |                                  | i               |             |   |                  | y that the information   |  |  |  |
|  |                                   |                                  | i               |             |   |                  | above is true and com-   |  |  |  |
|  |                                   |                                  | i               |             |   |                  | st of my knowledge and   |  |  |  |
|  | Ì                                 |                                  | İ               |             | 4   | belief.          |                          |  |  |  |
|  |                                   |                                  |                 |             |   | Name             |                          |  |  |  |
|  | <u> </u>                          |                                  | <br>            |             |   | rame : resi      | der.t                    |  |  |  |
|  |                                   |                                  | 1               |             |   | Position         | Mil Hrc.                 |  |  |  |
|  |                                   |                                  |                 |             |   | Company          | 1 / A                    |  |  |  |
|  |                                   |                                  | ŀ               |             |   | Date             |                          |  |  |  |
|  |                                   |                                  | l               |             |   | -1-ر             |                          |  |  |  |
|  | , h                               |                                  |                 |             |   |                  | -0                       |  |  |  |
| /337   | ·                                 |                                  | i i             |             |   | T                | L. Altria                |  |  |  |
|  |                                   |                                  |                 |             |   | I hereby certify |                          |  |  |  |
|  | h                                 |                                  | ļ               |             |   | shown on the o   | eld notes of actual      |  |  |  |
|  | Y A                               |                                  | ļ               |             |   | protted tham rid | Whe or under my life     |  |  |  |
|  |                                   |                                  | i               |             |   |                  | d that the same is true  |  |  |  |
|  |                                   |                                  | i               |             |   |                  | the best of my knowledge |  |  |  |
|  |                                   |                                  |                 |             |   | and belief.      | inc pear of my mowiedge  |  |  |  |
|  |                                   |                                  | l               |             |   |                  | signer '                 |  |  |  |
|  | 1390'                             |                                  | ľ               |             |   |                  |                          |  |  |  |
|  |                                   |                                  | i               |             |   | Date Surveyed    | 1 - 10/0                 |  |  |  |
|  |                                   |                                  | İ               |             |   |                  | ang 7 1969               |  |  |  |
|  | ļ                                 |                                  |                 |             |   |                  | fessional Engineer       |  |  |  |
|  |                                   |                                  |                 |             |   | and/or Land Su   |                          |  |  |  |
|  | <u> </u>                          |                                  |                 |             |   | Jer              | Dirigap                  |  |  |  |
|  |                                   |                                  | 00 1505         |             | <u>, , , , , , , , , , , , , , , , , , , </u> | Certificate No.  | ~ /                      |  |  |  |
| 0 330 660 9  | 90 1320 1650 190                  | <b>30 23</b> 10 26 <b>4</b> 0 20 | 00 1500         | 1000        | 500 0   |                  | 101                      |  |  |  |

## INSTRUCTIONS FOR COMPLETION OF FORM C-128

- 1. Operator shall furnish and certify to the information called for in Section A.
- 2. Operator shall outline the dedicated acreage for both oil and gas wells on the plat in Section B.
- 3. A registered professional engineer or land surveyor registered in the State of New Mexico or approved by the Commission shall show on the plat the location of the well and certify this information in the space provided.
- 4. All distances shown on the plat must be from the outer boundaries of the Section.
- 5. If additional space is needed for listing owners and their respective interests as required in question 3 of Section A, please use space below.

OCRID 153653 PROP 18883 PODI 52820

i.

Administrative Order WFX-744 Ready Oil and Gas Management November 24, 1998

## IT IS THEREFORE ORDERED THAT:

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. . . . . . . . .

The applicant, Ready Oil and Gas Management, be and the same is hereby authorized to inject water into the Yates formation at approximately 795 feet to approximately 828 feet through 2 3/8-inch plastic lined tubing set in a packer located within 100 feet of the uppermost injection perforations in the following described wells for purposes of secondary recovery to wit:

Wills Well No.34 API No.30-015-10420 2630' FNL & 1980' FWL – Unit 'F' Injection Interval: 798 feet to 827 feet Packer Setting: 775 feet Maximum Injection Pressure: 450 psig

#### Well No.43

API No.30-015-20229 1990' FSL & 1337' FWL – Unit 'K' Injection Interval: 795 feet to 828 feet Packer Setting: 782 feet Maximum Injection Pressure: 450 psig

Both in Section 13, Township 20 South, Range 28 East, Eddy County, New Mexico.

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R. 2511 WIN or Freder