

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REVISED

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

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

| | | | | | |
|---|---------------------------------|----------------------|------------------------|--------------------------------|----------------|
| Operator TXO Production Corp. | | | Lease Yates Federal | | Well No. 10 |
| Unit Letter H | Section 18 | Township 20 South | Range 29 East | County Eddy | NMPM |
| Actual Footage Location of Well: 1680 feet from the North line and 660 feet from the East line | | | | | |
| Ground level Elev. 3265.1 | Producing Formation Delaware | Pool Undesignated | | Dedicated Acreage: 40 Acres | |

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
☐ Yes ☐ No If 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 interest, has been approved by the Division.

OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature

Printed Name

Robert F. Scott

Position

Dist. Safety Envir. Coordinator

Company

TXO Production Corp.

Date

December 5, 1989

SURVEYOR CERTIFICATION

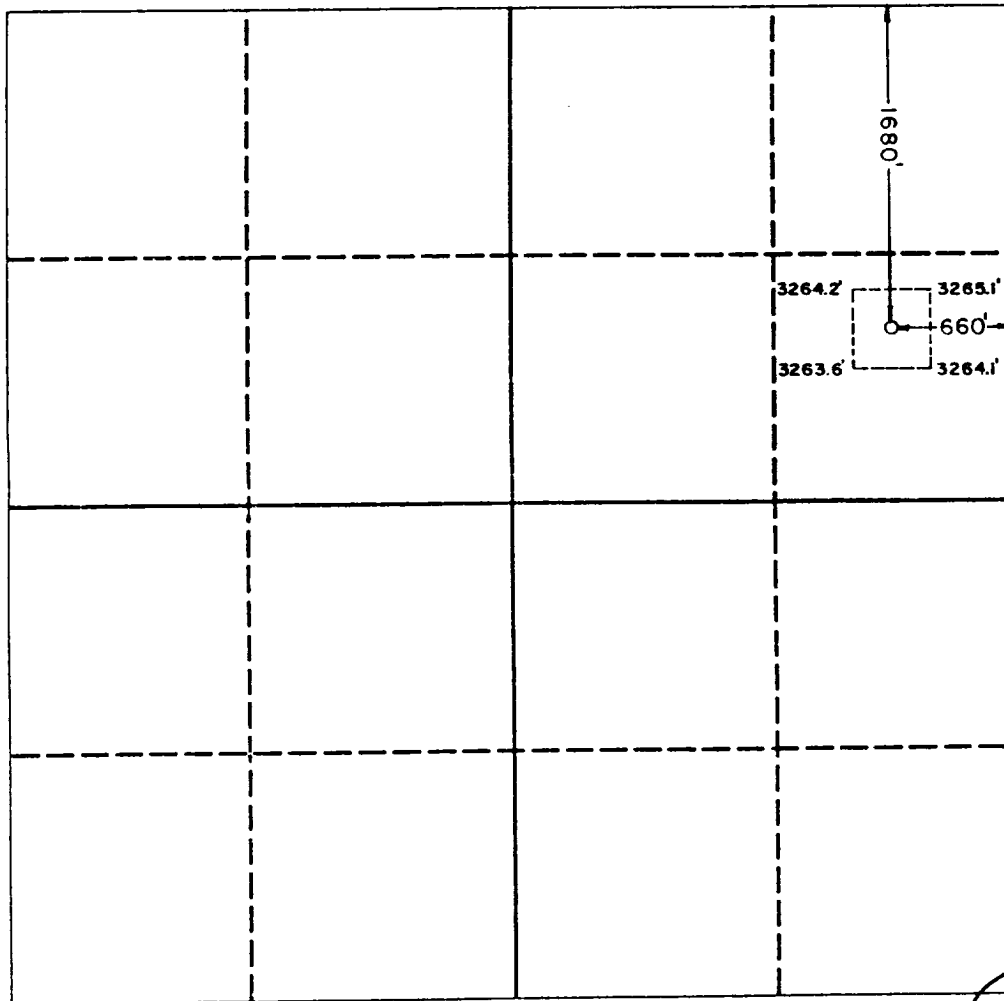
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

November 30, 1989

Signature & Seal of
Professional Surveyor

JOHN W. WEST, JR.
Certification No. 676
DONALD J. EIDSON, JR.
Certification No. 3239
NEW MEXICO



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