

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTP. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-102
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

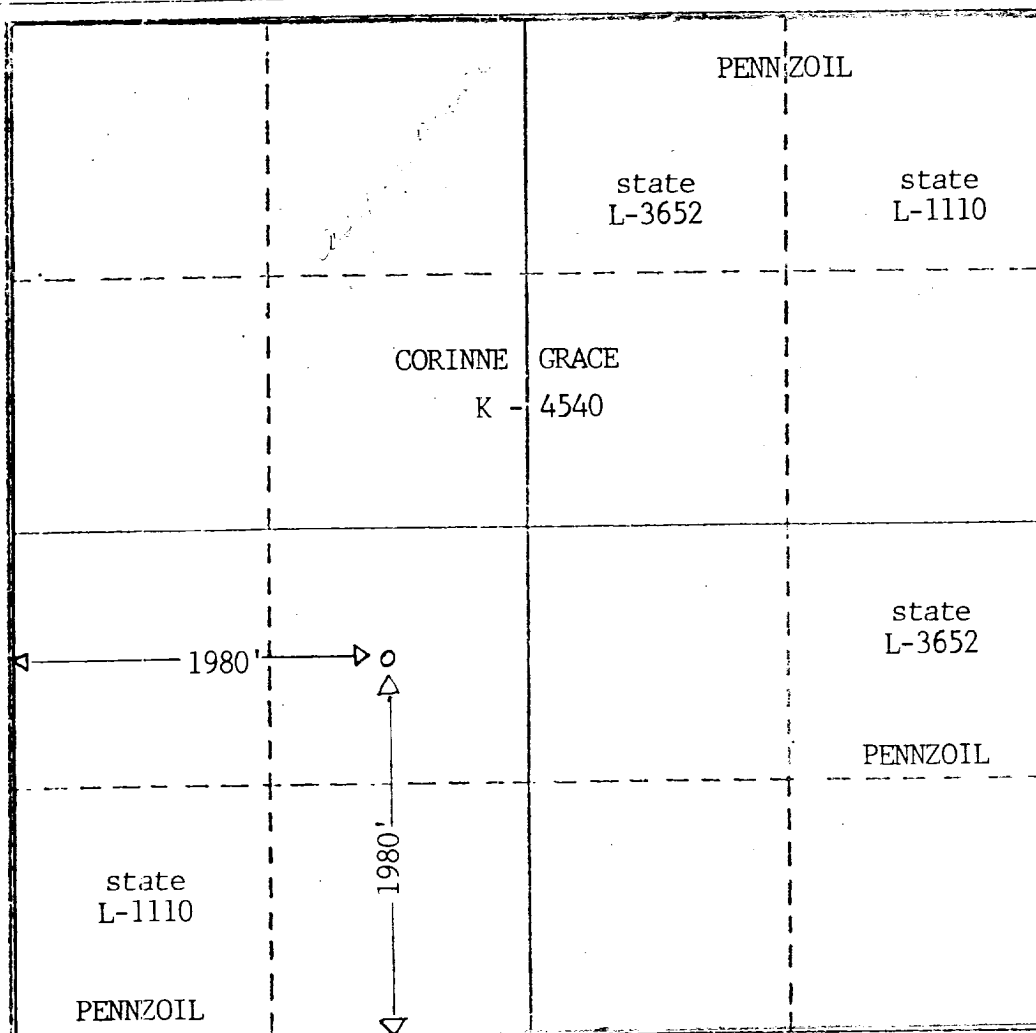
Operator <u>Corinne Grace</u>		Lease <u>White Baby Com.</u>		OCT 29 1981		Well No. <u>1</u>
Unit Letter <u>K</u>	Section <u>16</u>	Township <u>24 South</u>	Range <u>26 East</u>	County <u>O. C. D.</u>		
Actual Footage Location of Well: <u>1980</u> feet from the <u>West</u> line and <u>1980</u> feet from the <u>South</u> line						
Ground Level Elev. <u>3414.6</u>	Producing Formation <u>Morrow</u>		Pool <u>White City Penn Gas Pool</u>		Dedicated Acreage: <u>640</u> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation communitization agreement

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 interests, has been approved by the Division.



CERTIFICATION

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

Name Corinne Grace
Position Operator
Company Corinne Grace
Date October 27, 1981

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 _____
Registered Professional Engineer and/or Land Surveyor _____

Certificate No. _____