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

330

660

1320

1650

1980 2310

## 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

P.O. Drawer DD, Arlesia, NM 88210

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

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 Well No. Operator OXY USA Inc. Villa B 1 Range Unit Letter Section Township County 23S 28E **NMPM** Eddy Actual Footage Location of Well: 990 North 1980 line and feet from the line feet from the Dedicated Acreage: **Producing Formation** Pool Ground level Elev. 3011.9' Morrow North Loving 320 1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? No No If answer is "yes" type of consolidation Yes If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if neccessary. 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 in true and complete to the 066 best of my knowledge and belief. Signature O **|**1980| Printed Name F.A. Vitrano Region Operations Manager Company OXY USA Inc. 11/15/90 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 supervison, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed Signature & Seal of Professional Surveyor Certificate No. 2640 1500 1000 500 0 2000