

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

State of New Mexico
Geology, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89
RECEIVED

OIL CONSERVATION DIVISION

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

JUN 6 '90

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

C. C. D.
ARTESIA, OFFICE

| | | | | | |
|--|---------------|--|-----------------------------|----------------|--------------------------------|
| Operator Kaiser-Francis Oil Company ✓ | | | Lease Cavalier | | Well No. 1 |
| Unit Letter J | Section 28 | Township 23S | Range 28E | County Eddy | |
| Actual Footage Location of Well: 2310 feet from the South line and 1650 feet from the East line | | | | | |
| Ground level Elev. | | Producing Formation Middle Bone Springs | Pool South Culebra Bluff | | Dedicated Acreage: 80 Acres |

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).

n/a

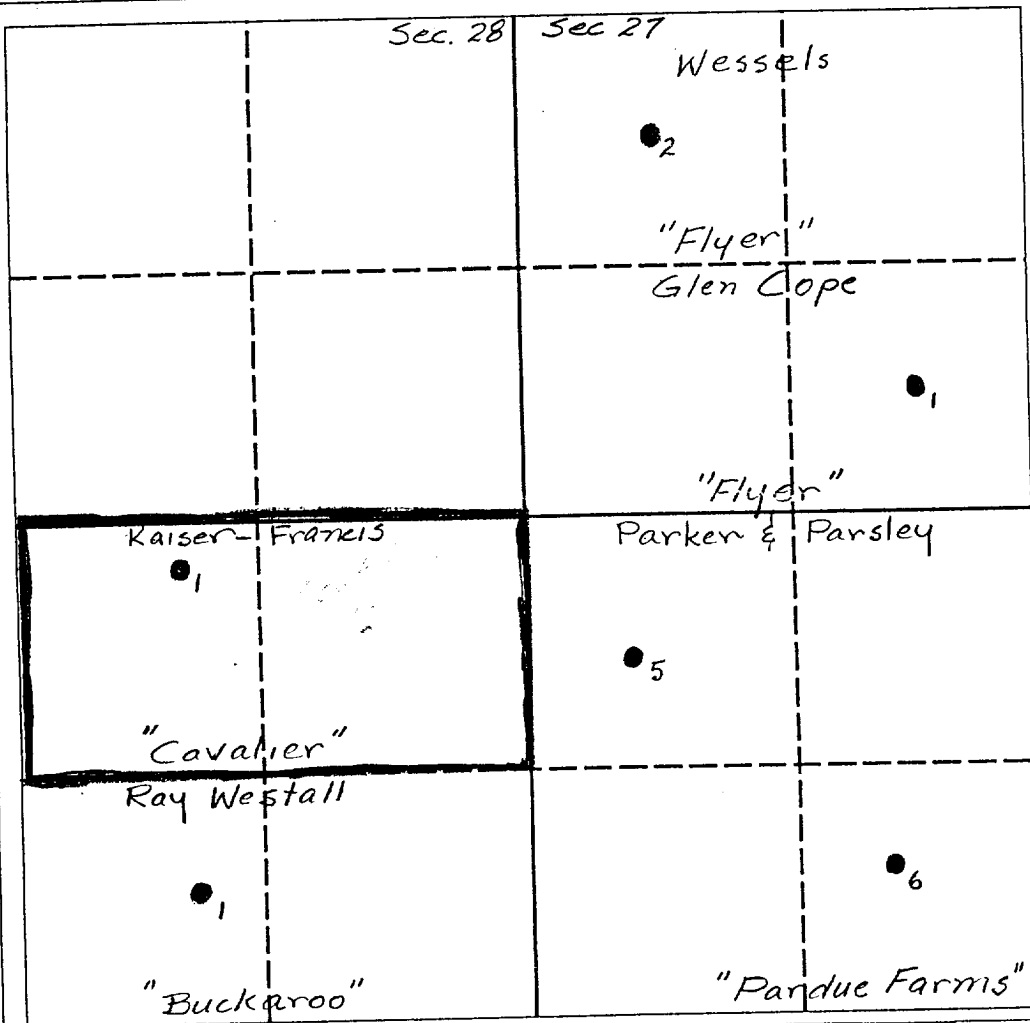
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

n/a

☐ 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
Charlotte Van Valkenburg

Printed Name
Charlotte Van Valkenburg

Position
Technical Coordinator

Company
Kaiser-Francis Oil Company

Date
4/5/90

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 supervision, 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.