

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO. 30-045-27480
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name FC DECKER PRIMO COM
8. Well No. # 2
9. Pool name or Wildcat <i>Cedar Hill</i> Fruitland Coal
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6073' GR

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER
2. Name of Operator MESA OPERATING LIMITED PARTNERSHIP
3. Address of Operator P.O. BOX 2009, AMARILLO, TEXAS 79189
4. Well Location Unit Letter <u>H</u> : <u>2025</u> Feet From The <u>North</u> Line and <u>1330</u> Feet From The <u>East</u> Line Section <u>19</u> Township <u> </u> Range <u> </u> NMPM San Juan County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: <u>Amended Location</u> ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

The location on the above referenced well was moved to accommodate a larger location. An amended Well Location and Acreage Dedication Plat is attached.

RECEIVED
MAY 29 1990
OIL CON. DIV.
DIST. 3

xc: NMOCDA-A (0+3), WF, Reg, Land, Expl., Drlg

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

SIGNATURE Cathy R. McKee TITLE Regulatory Analyst DATE 5/25/90

TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY Ernest Berach DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

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

OIL CONSERVATION DIVISION

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

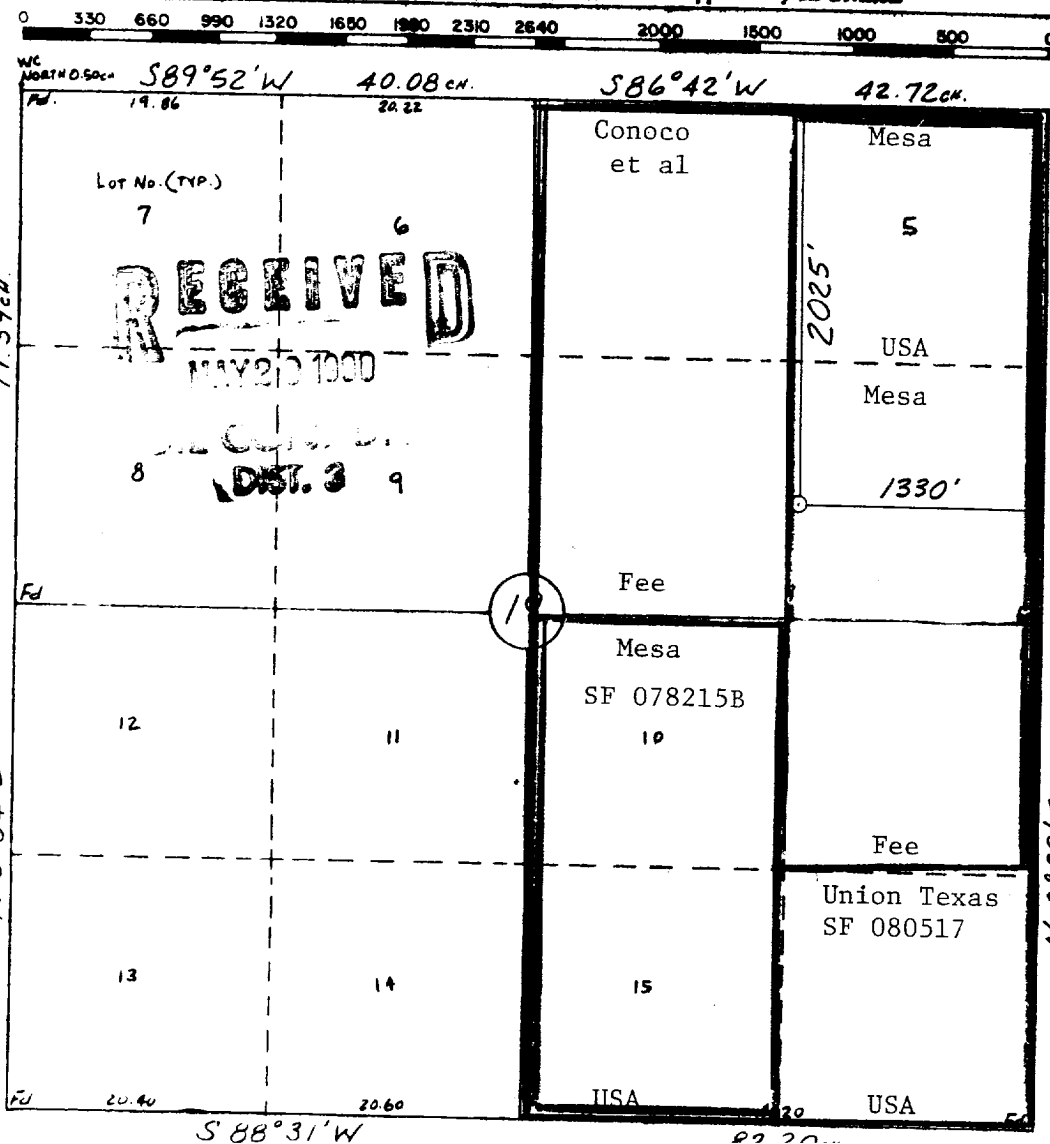
DISTRICT II
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1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MESA OPERATING LIMITED PARTNERSHIP			Lease FC DECKER PRIMO COM		Well No. 2
Unit Letter H	Section 19	Township 32 N	Range 10 W	County San Juan	
Actual Footage Location of Well: 2025 feet from the North line and 1330 feet from the East line					
Ground level Elev. 6073	Producing Formation Fruitland Coal		Pool Cedar Hill Basin Fruitland Coal		Dedicated Acreage: E/2 324.85 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 interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? ☒ Yes ☐ No If answer is "yes" type of consolidation <u>Communitization</u> 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 Carolyn L. McKee
Printed Name Carolyn L. McKee

Position	Regulatory Analyst
Company	Mesa Limited Partnership

Date 5/25/90

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.

5-21-90

Date Surveyed
William E. Mahan II

Signature & Seal of Professional Surveyor

Certificate No. PROFESSIONAL LAND SURVEYOR