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. 30-045-27524

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. E 4426-1B

## 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.)

7. Lease Name or Unit Agreement Name: FC STATE COM

1. Type of Well: OIL WELL [ ] GAS WELL [X] OTHER

2. Name of Operator: MESA OPERATING LIMITED PARTNERSHIP

8. Well No. # 12

3. Address of Operator: P.O. BOX 2009, AMARILLO, TEXAS 79189

9. Pool name or Wildcat: Basin Fruitland Coal

4. Well Location
Unit Letter A : 1155 Feet From The North Line and 1255 Feet From The East Line
Section 36 Township 32N Range 11W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6183' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | | | SUBSEQUENT REPORT OF: | | | |
|---|---|---|---|---|---|---|---|
| PERFORM REMEDIAL WORK | [ ] | PLUG AND ABANDON | [ ] | REMEDIAL WORK | [ ] | ALTERING CASING | [ ] |
| TEMPORARILY ABANDON | [ ] | CHANGE PLANS | [ ] | COMMENCE DRILLING OPNS. | [ ] | PLUG AND ABANDONMENT | [ ] |
| PULL OR ALTER CASING | [ ] | | | CASING TEST AND CEMENT JOB | [ ] | | |
| OTHER: | [ ] | | | OTHER: Moved Location | | | [X] |

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 well has been moved only 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: NMOCD-A (0+3), WF, Reg, Land, Expl., Drilling

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

SIGNATURE Carolyn L. McKee TITLE Regulatory Analyst DATE 5/25/90

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE

CONDITIONS OF APPROVAL, IF ANY:

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

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State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-102
Revised 1-1-89

## WELL LOCATION AND ACREAGE DEDICATION PLAT
All Distances must be from the outer boundaries of the section

| Operator | Lease | Well No. |
|---|---|---|
| MESA OPERATING LIMITED PARTNERSHIP | FC STATE COM | 12 |

| Unit Letter | Section | Township | Range | County |
|---|---|---|---|---|
| A | 36 | 32 N | 11 W NMPM | San Juan |

Actual Footage Location of Well:
1155 feet from the North line and 1255 feet from the East line

| Ground level Elev. | Producing Formation | Pool | Dedicated Acreage: |
|---|---|---|---|
| 6183 | Fruitland Coal | Basin Fruitland Coal | E/2 320 Acres |

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

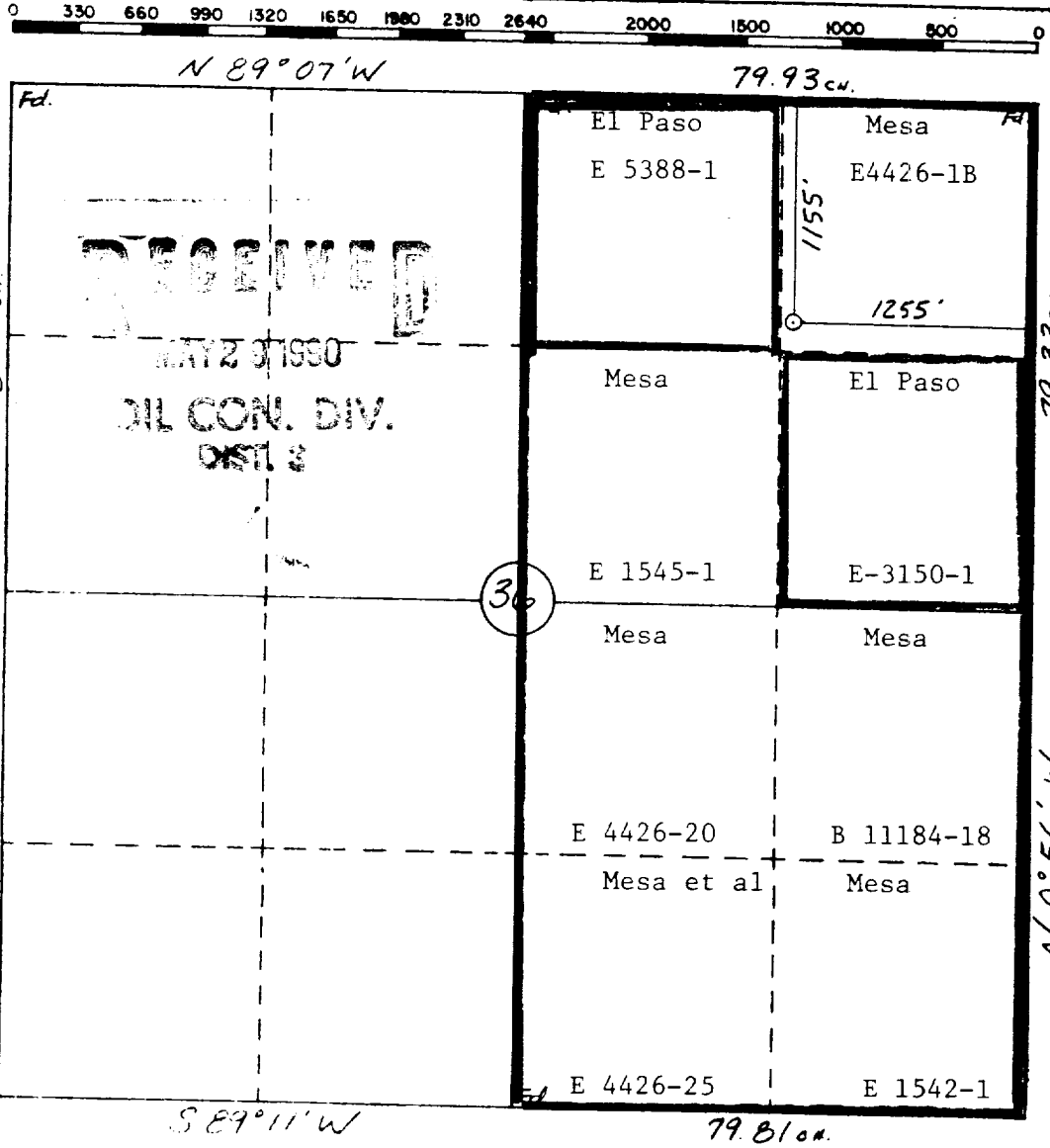
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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.?

[X] Yes [ ] No If answer is "yes" type of consolidation Communitization

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 in true and complete to the best of my knowledge and belief.*

Signature: Carolyn 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 supervison, and that the same is true and correct to the best of my knowledge and belief.*

5-21-90

Date Surveyed
Signature & Seal of Professional Surveyor: William E. Mahnke II
NEW MEXICO #8466 REGISTERED PROFESSIONAL LAND SURVEYOR
Certificate No. 8466