CMD : OG6CWBD ONGARD

CAPTURE SINGLE WELL BOND

06/04/08 13:52:08 OGODLP -TPK9

OGRID Ideatifier : 9759 API Well No : 30 15 1904

Operator Name, Address : PARRISH, H DWANE & RHONDA K

1306 S 9TH ST ARTESIA, NM 88210

Bond Idn : 251961 Bond Status : A Prop Idn : 30829

Prop Name

: GRARIDGE STATE

Well No : 003 East/West Lot Idn

U/L Sec Township Range North/South --- --- ----- '------

Surface Locn: L 17 18S 28E FTG 2350 F S FTG 1050 F W

API County : 15

Bond Details: Type (Cash/Surety - C/S): S Bond Co Idn: 12 Amt: 7136

Company OGRID Identifier : 224684

Company Name, Address : LEXON INSURANCE COMPANY

10002 SHELBYVILLE RD

SUITE 100

Effective Date: 01-01-1900

Cancellation Date : 12-31-9999

Issuer Bond No : 1012792

E0005: Enter data to modify or PF keys to scroll PF01 HELP PF02 PF03 EXIT PF04 GoTo PF05

PF06 CONFIRM

PF07 PF08 PF09 COMMENT PF10 NXTBOND PF11

#### STATE OF NEW MEXICO ONE WELL PLUGGING BOND

## FOR CHAVES, EDDY, LEA, MCKINLEY, RIO ARRIBA, ROOSEVELT, SANDOVAL AND SAN JUAN COUNTIES ONLY

BOND NO. 1012792 WELL DEPTH 2,136 AMOUNT OF BOND \$7,136.00 COUNTY Eddy Effective 1-1-08

Bond Amount is \$5,000 plus \$1 per foot of projected depth of Note: proposed well or measured depth of existing well.

\*Under certain conditions, the appropriate district office of the Division may authorize a well to be drilled as much as 500 feet deeper than the depth provided in the applicable financial assurance. (See Rule 101)

File with the Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, NM 87505

KNOW ALL MEN BY THESE PRESENTS:			
Services) শৃশ্প্রভাষপ্রশৃশ্পশৃশ্পশৃশ্পশৃশ্পশৃশ্পশৃশ্পশৃশ্পশৃ	ess in the State of New Mexico), as PRINCIPAL, on organized and existing under the laws of the State of ate of New Mexico, as SURETY, are firmly bound unto the servation Division of the Energy, Minerals and Natural N), pursuant to NMSA 1978, Section 70-2-14, as amended, which the PRINCIPAL and SURETY hereby bind themselv	te e , in	
The conditions of this obligation are such that:			
		as	
Graridge State No. 003	No. 30015-01904located 2350feet from the	e	
(Name of Well) South (North/South) line and 1050	feet from the West (East/West) lie	ne	
of Section 17 Township 18S (North	th) (South), Range 28E (East) (West),		
NMPM Eddy County, New Mo	exico.		
hem, shall cause said well be properly plugged and abandor peneficial purpose, in accordance with the rules and orders of 19.15.3.101 NMAC] and 202 [19.15.4.202 NMAC], as such THEN AND IN THAT EVENT, this obligation shall	of the DIVISION, including but not limited to Rules 101 hardes now exist or may hereafter be amended;  I be null and void; otherwise and in default of complete		
compliance with any and all of said obligations, the same sha			
H. Dwane & Rhonda K. Parrish	Lexon Insurance Company SURETY		
1306 South 9th, Artesia, NM 88210	10002 Shelbyyille Road, Suite 100, Louisville, 144 4022	3	
Address Address	A Continues	_	
Signature Signature	Attorney-in-Fact Andrew C. Allison		
Title			

If PRINCIPAL is a corporation, affix Corporate seal here

Corporate surgey affix Corporate seal here

# ACKNOWLEDGMENT FORM FOR INDIVIDUAL (If dba, must read – Example: John Doe dba Well Services)

STATE OF West Marketines	
STATE OF $\frac{\int d^2 x d^2 x + \int d^2 x + \int d^2 x + \int d^2 x}{SS}$ .  COUNTY OF $\frac{\int d^2 x d^2 x}{\int d^2 x + \int d^2 x}$	
This instrument was acknowledged before me on this	Harr day of Acres 20 08
by A Tracone Ruscosko Sc (Name of Individual)	manufe to manufe
SEAL OFFI TERES  NOT My Commission Expires  OFFI TERES NOT STATE C My Gomm	Notary Public A E. HUMMEL ARY PUBLIC F NEW MEXICO Sission Expires 2-1-2-14
ACKNOWLEDGMENT FORM FOR PARTNERSHIP,	CORPORATION, OR LIMITED LIABILITY COMPANY
STATE OF) SS.	
COUNTY OF	
This instrument was acknowledged before me ond	ay ofby
·	
(Capacity, e.g., partner, president, manager, member)	(Name of partnership, corporation or fimited liability company)
	Note on Bublic
	Notary Public
SEAL.	·
My Commussion Expres	
	M FOR CORPORATE SURETY
STATE OF Oklahoma ) SS.	
COUNTY OF Oklahoma	
This instrument was acknowledged before me on this29t	day of January
hy Andrew C. Allison as Attorney (Name of Attorney-in-Fact) OTAP  PUBLIC SEAL	-in-Fact for texon Insurance Company (Name of Corporate Sylving) (Name of Corporate Sylving) (Notary Public
4/36/11  My Commission Expires	
Corporate Surety attach Power of Attorney	
	APPROVED BY:
•	•
	OIL CONSERVATION DIVISION OF NEW MEXICO
	By Dand L. Butto

### POWER OF ATTORNEY

LX - 23291

\*

# Lexon Insurance Company

			•	
KNOW ALL MEN BY THESE PRESENTS, that I	EXON INSURANCE COMPANY,	a Texas Corporation,	with its principa	al office in
_ouisville. Kentucky, does hereby constitute and appoint:				
,,	Atlus E. Wilder III, Tina E. Switze	er, Andrew C. Allisoi	n, Fred A. Barke	:r *****

its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of LEXON INSURANCE COMPANY on the 1st day of July, 2003 as follows:

Resolved, that the President of the Company is hereby authorized to appoint and empower any representative of the Company or other person or persons as Attorney-In-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed \$2,500,000.00, Two-million five hundred thousand dollars, which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-In-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-In-Fact, so appointed, may be removed for good cause and the authority so granted may be revoked as specified in the Power of Attorney.

Resolved, that the signature of the President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Vice President, and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power or certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certificate so executed and sealed shall, with respect to any bond of undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS THEREOF, LEXON INSURANCE COMPANY has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 2nd day of July, 2003.



LEXON INSURANCE COMPANY

David E. Campbell President

#### **ACKNOWLEDGEMENT**

On this 2nd day of July, 2003, before me, personally came David E. Campbell to me known, who being duly sworn, did depose and say that he is the President of LEXON INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.

"OFFICIAL SEAL"
LYDIA J. DEJONG
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 1/12/2007

Lydia J. DeJong Notary Public

#### CERTIFICATE

I, the undersigned, Secretary of LEXON INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the foregoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Sealed at Lombard, Illinois this

O9+h Day of JAn . 20 08

TEXAS INSURANCE

Donald D. Buchanan