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

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## 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

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## WELL LOCATION AND ACREAGE DEDICATION PLAT DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 All Distances must be from the outer boundaries of the section Well No. Lease 1 Operator Bill Thorp State COLLINS OIL & GAS County Range Township CHAVES Section Unit Letter 27E. NMPM 8S. 12 Μ Actual Footage Location of Well: WEST line 330 feet from the SOUTH Dedicated Acreage: line and 330 feet from the Pool Producing Formation 40 Acres Ground level Elev. Palma Mesa San-Andres 3926 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.? 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 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 Ray & Callins Printed Name ROY D. COLLINS Position PRESIDENT Company COLLINS OIL & GAS CORP. Date 3-31-93 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 SECTION 12, T.8S., R.2/E., N.M.P.M. supervison, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed 3/29/93.1404 <u>\_</u> Signature & Scal of Professional Surveyor, y 30' finate h 62ହ 12827ROY 500 ñ 1000 1500 2000 1980 2310 2640 1650 1320 990 660 330