

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

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-102
 Revised 1-1-85

OIL CONSERVATION DIVISION

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

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

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

DISTRICT III
 1620 Rio Brazos Rd., Aztec, NM 87410

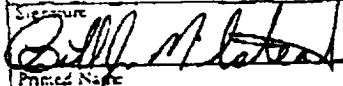
WELL LOCATION AND ACREAGE DEDICATION PLAT
 All Distances must be from the outer boundaries of the section

Operator MCKAY OIL CORP.			Lease S 4 MILE DRAW FED "B"		Well No. 2
Upr. Letter K	Section 24	Township 6S	Range 22E	County CHAVES	
Actual Footage Location of Well: 1470 feet from the SOUTH line and 1760 feet from the WEST line					
Grass level Elev. 4140	Producing Formation ABO		Pool W. Pecos Slope Abo		Dedicated Acreage 160 Acres

- Outline the acreage dedicated to the subject well by colored pencil or texture marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc.?
 - 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, force-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.

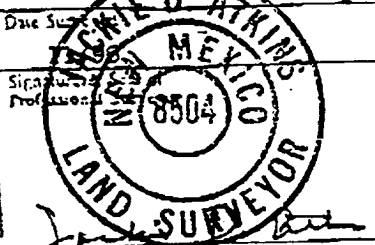
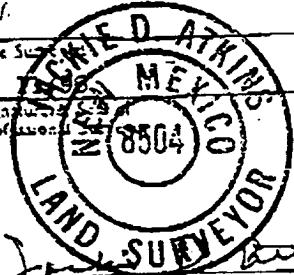
OPERATOR CERTIFICATION

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

Signature

 Printed Name
Bill J. Milstead
 Position
Vice President
 Company
McKay Oil Corporation
 Date
12-12-96

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was placed 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 Signed _____
 Signature

 Professional

 Certificate No.
LS 8504

