

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 1-1-89

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

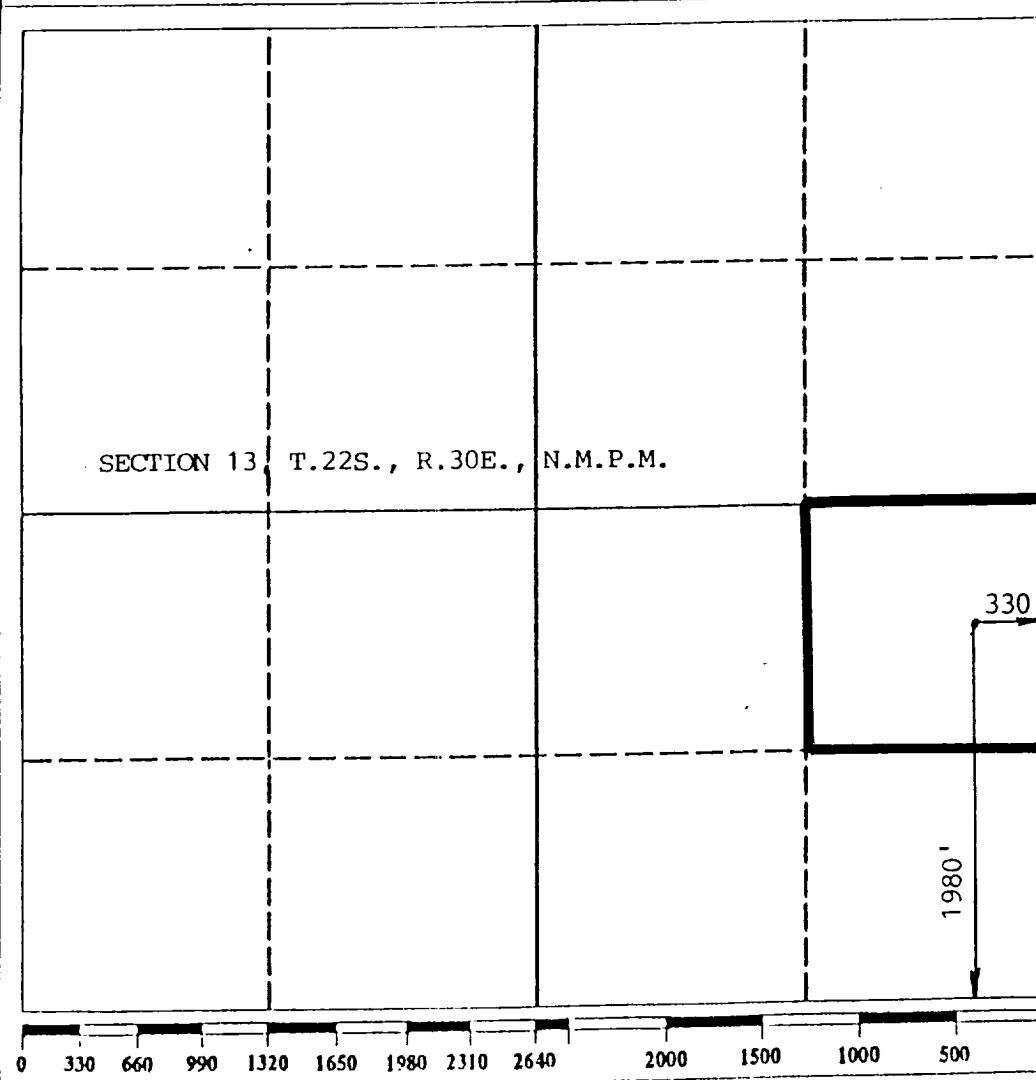
| | | | | | |
|---|----------------------|-------------------------|-----------------------------------|-----------------------|-----------------------|
| Operator MITCHELL ENERGY | | | Lease APACHE 13 FEDERAL | | Well No. #4 |
| Unit Letter I | Section 13 | Township 22S. | Range 30E. | County EDDY | |
| Actual Footage Location of Well: 1980 feet from the SOUTH line and 330 feet from the EAST line Ground level Elev. 3355 Producing Formation Delaware Pool Wildcat CABIN LAKE Dedicated Acreage: 40 Acres | | | | | |

- Outline the acreage dedicated to the subject well by colored pencil or hatchure 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 interest of all owners been consolidated by communization, 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 communization, 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 George Mullen
 Printed Name **George Mullen**
 Position **Regulatory Affairs Specialist**
 Company **Mitchell Energy Corporation**
 Date **September 28, 1993**

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.

Date Surveyed **8/10/93**
 Signature & Seal of Professional Surveyor

 Coefficient No. **6290**
16APACHE