## District I 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. Frat St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720

Ostrict III 1000 Rio Brazos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 Ostrict IV

1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462

12 Dedicated Acres

<sup>13</sup> Joint or Intill

## State of New Mexico

## Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office

☐ AMENDED REPORT

		WI	ELL LO	CATION	AND ACRE	EAGE DEDICA	ATION PLAT			
<sup>1</sup> AP1 Number 30-025-33696			<sup>2</sup> Pool Code 23000			Pool Name EUNICE MONUMENT; GRAYBURG-SA				
<sup>4</sup> Property Code		<sup>5</sup> Property Name							* Well Number	
302375				13						
OGRID No.				* Elevation						
873										
					" Surface L	ocation				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
С	35	19E	36E		330	NORTH	1650	WEST	LEA	
			" Bot	tom Hole	Location If	Different From	Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

S Order No.

14 Consolidation Code

luso'	, o <u>č</u> 8		17 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that thus organization either owns a working interest or unleasted mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order hereinfore entered by the division.
			Signature Date  ALICIA FULTON  Printed Name  Alicia. Fulton Parachecorp.com  E-mail Address
			"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 belief.  Date of Survey
			Signature and Seal of Professional Surveyor  Certificate Number