

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Avenue, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

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 June 10, 2003  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-025-36439	<sup>2</sup> Pool Code 96326	<sup>3</sup> Pool Name LUSK; ATOKA, SOUTHEAST (GAS)
<sup>4</sup> Property Code 300257	<sup>5</sup> Property Name SOUTHEAST LUSK "34" FEDERAL	<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 224400	<sup>8</sup> Operator Name EDGE PETROLEUM OPER. CO., INC.	<sup>9</sup> Elevation 3557' GR



<sup>10</sup> Surface Location

UL or lot no. E	Section 34	Township 19S	Range 32E	Lot Idn	Feet from the 1530	North/South line NORTH	Feet from the 40	East/West line WEST	County LEA
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<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no. E	Section 34	Township 19S	Range 32E	Lot Idn	Feet from the 1506	North/South line NORTH	Feet from the 721	East/West line WEST	County LEA
<sup>12</sup> Dedicated Acres 320	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.						

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

<sup>16</sup>  BHL W/2 SECTION 34	<sup>17</sup> OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature AMANDA SIMMONS Printed Name PRODUCTION ASST. asimmons@edgepet.com Title and Email Address 2-25-05 Date			
	<sup>18</sup> 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			