| District i  | State of                | Form C-102  |  |
|---|-------------------------|---|--|
| 1625 N. French Dr., Hobbs, NM 88240<br><u>District II</u><br>1301 W. Grand Avenue, Artesia, NM 88210<br><u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410 | OIL CONSER<br>1220 Sout | atural Resources Department<br>VATION DIVISION<br>n St. Francis Dr. | Revised June 10, 2003<br>Submit to Appropriate District Office<br>State Lease - 4 Copies<br>Fee Lease - 3 Copies |
| District IV<br>1220 S. St. Francis Dr., Santa Fe, NM 87505<br>WEI   |                         | e, NM 87505<br>ACREAGE DEDICATION                                   | AMENDED REPORT   |
| <sup>1</sup> API Number   | <sup>2</sup> Pool Code  |   | pol Name   |

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| 1 A  | PI Numbe            | r                          |                   | <sup>2</sup> Pool Cod                | e             |                        | <sup>3</sup> Pool Na | me                     |                          |  |
|--|---------------------|----------------------------|-------------------|--------------------------------------|---------------|------------------------|----------------------|------------------------|--------------------------|--|
| 30-  | 025-018             | 20                         |                   | 54150                                |               | Sand Springs; Devonian |                      |                        |                          |  |
| <sup>4</sup> Property C                                      | ode                 | <sup>5</sup> Property Name |                   |                                      |               |                        |                      |                        | <sup>6</sup> Well Number |  |
| 15842  | 2                   |                            | Lagarto AMZ State |                                      |               |                        |                      |                        | 1                        |  |
| <sup>7</sup> OGRID N   | io.                 |                            |                   | <sup>8</sup> Operator Name           |               |                        |                      | <sup>a</sup> Elevation |                          |  |
| 02557  | 5                   |                            |                   | Yates Petroleum Corporation 4139' GR |               |                        |                      |                        | 4139' GR                 |  |
| <sup>10</sup> Surface Location                               |                     |                            |                   |                                      |               |                        |                      |                        |                          |  |
| UL or lot no.  | Section             | Township                   | Range             | Lot Idn                              | Feet from the | North/South line       | Feet from the        | East/West              | line County              |  |
| М  | 1                   | 1 <b>1</b> S               | 34E               | M                                    | 660           | South                  | 660                  | West                   | t Lea                    |  |
| <sup>11</sup> Bottom 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              |  |
|  |                     |                            |                   |                                      |               |                        |                      |                        |                          |  |
| <sup>12</sup> Dedicated                                      | <sup>13</sup> Joint | or Infill <sup>14</sup>    | Consolidatio      | n Code <sup>15</sup> O               | rder No.      |                        |                      |                        |                          |  |
| Acres  |                     |                            |                   |                                      |               |                        |                      |                        |                          |  |
| 40   |                     |                            |                   |                                      |               |                        |                      |                        |                          |  |

## 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

| 16   |   |       | <sup>17</sup> OPERATOR CERTIFICATION<br>I hereby certify that the information contained herein |
|------|---|-------|--|
|      |   |       | is true and complete to the best of my knowledge and   |
|      |   |       | belief.  |
|      |   |       | Stormi Davis   |
|      |   |       | Printed Name   |
|      |   |       | Regulatory Compliance Technician   |
|      |   |       | Title and E-mail Address   |
|      |   |       | stormid@ypcnm.com  |
|      |   |       | Date   |
|      |   |       | 10-6-05  |
|      |   |       | <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.   |
|      |   |       |  |
|      |   | <br>  | Date of Survey   |
|      |   |       | Signature and Seal of Professional Surveyor:   |
|      |   |       |  |
| 660' |   |       |  |
|      |   |       |  |
| ò    |   |       |  |
| 99   |   |       | Certificate Number   |
|      | 1 | <br>ł |  |