District | PO Bax 1980, Ilusia, NM 58241-1980 District II

PO Drawer DD, Artesia, NM \$211-0719 District 111

1000 Rio Brazos Rd., Azter, NM \$7410

District IV

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PO Bax 2068, Santa Fe, NM 87504-2088

State of New Mexico Energy, Macrals & Natural Resources Department

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OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Form C-102 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

AMENDED REPORT

		WE	LL LO	CATI	ON AND	ACF	REAGE DEDI	CATION PI	LAT			
		¹ Pool Code			Pool Name							
30-025		49970			Pearsall Queen							
* Property				operty Name				* Well Number				
-003030 16542 MCA			-Unit-	-+to	De l'ename	d-te	to Queen "B" bi			6 147-		
'OGRID No.				⁴ Operator Name					· Élevation			
005073			NOCO INC.							3996 ′		
¹⁹ Surface Location												
UL or lot no.	Section	Township	Range	Lot Ide	Feet from	the	North/South line	Feet from the	East/We	ut line	County	
F			32E		1980 <i>'</i>		North	1980 <i>'</i>	West		Lea	
¹¹ Bottom Hole Location If Different From Surface												
UL or lot so.	Section	Township	Range	Lot Ide	Fort from	lbe	North/South line	Feet from the	East/We	st llae	County	
¹³ Dedicated Acres ¹³ Joint or Infill ¹⁴ Consolidation Code ¹⁵ Order No.												
40	N											
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								¹⁷ OPE	RATOR	CER	TIFICATION	
									I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief			
								unie and con	quere to ine	best of my	thowiedge and belief	
			1980									
		0					•	1	1			
										/A	1 111	
								Stature	YW	pro l		
							· ·		Jerry W. Hoover Primed Name St. Conservation Coordinator			
				E								
1980'		} (5	Ē				Title				
				E					3/22/95			
								Date				
								¹⁸ SUR ^V	VEYOR	CER	TIFICATION	
								11			n shown on this plus	
								was plotted	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 Sur	Date of Survey			
								Signature an	Signature and Scal of Professional Surveyer:			
		- -										
								1				
								Certificate N	lumber			
1				- 1								