

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 Santa Fe Energy Operating Partners LP		Lease		Well No. 1	
Unit Letter I	Section 15	Township 16 South	Range 36 East	County NM	Lea
Actual Footage Location of Well: 2200 feet from the south line and 660 feet from the east line					
Ground level Elev. 3882.8'	Producing Formation ATOKA		Pool WILDCAT -N. LOVINGTON ATOKA		Dedicated Acreage: 320 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☒ Yes ☐ No

If answer is "yes" type of consolidation COMMUNITIZATION

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 communitization, 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

Michael R. Burton

Printed Name

Michael R. Burton

Position

District Drilling Engineer

Company

Santa Fe Energy Operating Partners LP

Date

4/16/89

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

February 22, 1989

Signature & Seal
Professional Surveyor

License No.

John W. West

John W. West

John W. West

John W. West

John W. West

John W. West

John W. West

John W. West

John W. West

back 9-11-89

ELF

RECEIVED

APR 25 1989

OCD
MOBBS OFFICE