

District I
PO Box 1968, Hobbs, NM 88241-1968
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1008 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-102
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 AFI Number 30-025-3376		2 Pool Code		3 Pool Name West Lovington Strawn	
4 Property Code 20074		5 Property Name Bus Barn 4			6 Well Number 1Y
7 OGRID No. 147179		8 Operator Name Chesapeake Operating, Inc.			9 Elevation 3926

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
T	4	16S	36E		2190'	South	870'	West	Lea

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
Lot 13	4	16S	36E		3158'	South	1190'	West	Lea

12 Dedicated Acres 160	13 Joint or Infill	14 Consolidation Code	15 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

Lot 4 50.60 ac.	Lot 3 50.47 ac.	Lot 2 50.35 ac.	Lot 1 50.22 ac.
Lot 5 40.00 ac.	Lot 6 40.00 ac.	Lot 7 40.00 ac.	Lot 8 40.00 ac.
Lot 12 40.00 ac.	Lot 11 40.00 ac.	Lot 10 40.00 ac.	Lot 9 40.00 ac.
Lot 13 40.00 ac. 1190'	Lot 14 40.00 ac.	Lot 15 40.00 ac.	Lot 16 40.00 ac.

17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature W. M. Hazlip
Printed Name LANDMAN
Title 7/24/97
Date

18 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