Submit to Appropriate District Office State Lease - 6 copies	Energy, N	State of New Mer Ainerals and Natural Res			Form C-101 Revised 1-1-89	
Fee Lease 5 copies <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM <u>DISTRICT 11</u> P.O. Drawer DD, Artesia, N	Sa	API NO (assigned by OCD on New Wells) 30 - 025 - 2904 5. Indicate Type of Lease STATE X FEE				
DISTRICT III 1000 Rio Brazos Rd., Azteo	, NM 87410			6. State Oil & Gas Lease 26 - 24/		
APPLICAT 1a. Type of Work: DRILL b. Type of Well:		D DRILL, DEEPEN, C	PLUG BACK	7. Lease Name or Unit A REODY - GULA	greement Name	
OIL CAS WELL	OTTER	SINGLE ZONE	X ZONE			
2. Name of Operator	GY CORPORATIO			8. Well No. 2		
3. Address of Operator P.O. BOX		ELL, NM		9. Pool name or Wildcat	auci Queen	
A Well Location	C : 660 Feet Fro		Line and 19	BO' Feet From The	WEST Line	
Section	18 Townst	hip 7-5 Rar 10. Proposed Depth		NMPM	County	
13. Elevations (Show wheth 3902 ' L		4. Kind & Status Plug. Bond	15. Drilling Contracto		Date Work will start 1-15 - 96	
17.	PR	OPOSED CASING AN	ND CEMENT PROG	RAM		
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH		EST. TOP	
171/2 "	133/8 * 85/8 *	2# 4 + 32 #	380' 3981'	40 3x	CREC	
71/8.	51/2 "	17#	10,204'	1395 SX	4060'	
Planss PENTOLA 5250 RE-Co	E TO SER A TE M THE 1-54', ACIDIZ MRETWIN TO	OUTEN FORMA DE ANO FERA THE OLIAN -	Coo' And A Tow SI48 Cruck Stanuu Oucen Ado Pormit E Data	Expires 1 Year Fro Unless Diffing Ur Place bo	m Approvel nderway	
ZONE. GIVE BLOWOUT PREV	ENTER PROGRAM, EANY.	e to the best of my knowledge and	i belief.		. ,	
SIGNATURE	1 m	Π	ILE ENGNIEER		DATE 10/31/96	
TYPE OR PRINT NAME	Kill Loss		505	- 623 - 4935 1	TELEPHONE NO.	
(This space for State Use)		SULTY SEXTON LEVISOR	τιε		5E8 0.6 1997	
APPROVED BY		II				

District I PO Box 1980, Hobbs, NM 82241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 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													
API Number			¹ Pool Code			' Pool Name							
30-025-29041				50450 OUAIL - 0				QUEEN					
' Property Code					³ Property Name				* Well Number				
011957 REQ.			6007 -	OY - GULF STATE					2				
				¹ Operator Name					' Elevation				
	<u> </u>	ies c	SENERGY CORPORATION!					3702 6		02'GL			
¹⁰ Surface Location													
UL or lot no.	Section 18	Township	Range	Lot Ida	Feet from th		North/South line	Feet from the	East/Wes	t üne	County		
	18	19-5	-		660'		NORTH	1980'	45	ST LEA			
¹¹ Bottom Hole Location If Different From Surface													
UL or iot ac.	Section	Township	Range	Lot Idm	Feet from th	l¢ ,	North/South line	Feet from the	East/West	line	County		
12 Dedicated Acr			Consolidatio	Code 14 C	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					UNIT HAS	BE	EN APPROVED	BY THE DIVI	SION				
10		8	660'	3				¹⁷ OPER	ATOR	CERT	IFICATION		
	1980'	8	Ļ					I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief					
		<u>∛</u>	3	8				a ne una comp	nese io ine de	est of my k	nonvlodge and belief		
		Ĭ		8				1			1		
		8		8					2		/		
). D	\sim			
LG- ZAH 7 CHEVRON, USA, MC.								Signature					
CHEVAN, USA, WC.							HIRK ROSS Priated Name						
						Frield Name							
					Title								
									131/96				
		·····		<u> </u>				Uste		-			
									EYOR (CERTI	FICATION		
								I hereby certify	, that the wel	l location	shown on this play		
								mas plotted fro	m field rotes	of actual .	surveys made by the same is true		
								and correct to	the best of m	y belief.	the same is the		
							Date of Survey						
								Signature and S	Scal of Profes	uional Sur	veyer:		
				1									
						Certificate Number							

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IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed contact the appropriate OCD district office. Independent subdivision surveys will not be acceptable.

- 1. The OCD assigned API number for this well
- 2. The pool code for this (proposed) completion
- 3. The pool name for this (proposed) completion
- The property code for this (proposed) completion 4
- The property name (well name) for this (proposed) 5. completion
- The well number for this (proposed) completion 8
- 7. Operator's OGRID number
- 8. The operator's name
- 9. The ground level elevation of this well
- The surveyed surface location of this well measured from 10. the section lines NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.
- Proposed bottom hole location. If this is a horizontal hole 11. indicate the location of the end of the hole.
- The calculated acreage dedicated to this completion to the 12. nearest hundredth of an acre
- 13. Put a Y if more than one completion will be sharing this same acreage or N if this is the only completion on this acreage
- 14. If more than one lease of different ownership has been dedicated to the well show the consolidation code from the following table: С
 - Communitization U
 - Unitization F
 - Forced pooling 0
 - Other P

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Consolidation pending

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISIONI

Write in the OCD order(s) approving a non-standard location, non-standard spacing, or directional or horizontal

This grid represents a standard section. You may superimpose a non-standard section over this grid. Outline the dedicated acreage and the separate leases within that dedicated acreage. Show the well surface location and bottom hole location, if it is directionally drilled, with the dimensions from the section lines in the cardinal directions. (Note: A legal location is determined from the perpendicular distance to the edge of the tract.) If this is a high engle or horizontal hole show that portion of the well bore that is open within this pool.

Show all lots, lot numbers, and their respective acreage.

If more than one lease has been dedicated to this completion, outline each one and identify the ownership as to both working interest and royalty.

- 17. The signature, printed name, and title of the person authorized to make this report, and the date this document was signed.
- 18. The registered surveyors certification. This section does not have to be completed if this form has been previously accepted by the OCD and is being filed for a change of pool or dedicated acreage.