

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Dept

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, Aztec, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

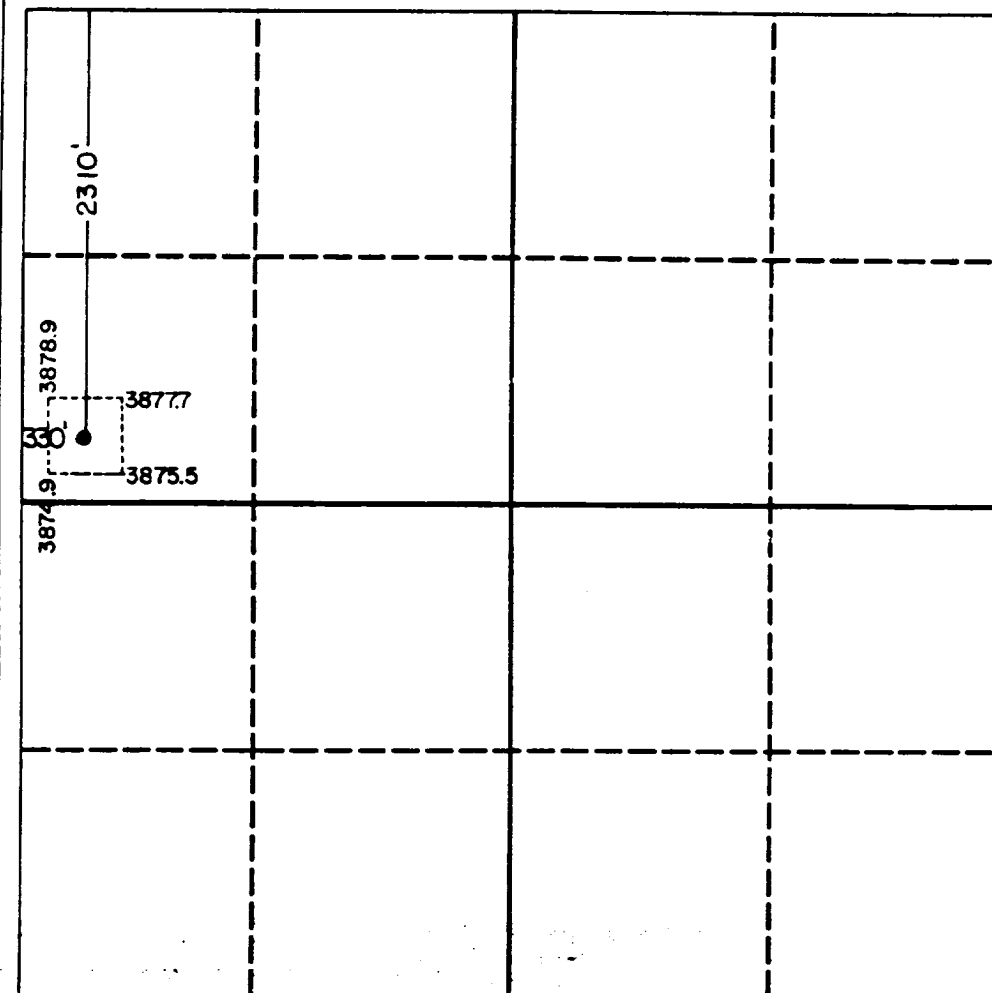
All Distances must be from the outer boundaries of the section

Operator MARATHON OIL CO.			Lease Love 3 Federal		Well No. 1
Unit Letter E	Section 3	Township 18 South	Range 32 East	County Lea	

Actual Footage Location of Well:

2310	feet from the	North	line and	330	feet from the	West	line
Ground level Elev. 3877.7	Producing Formation Bone Spring		Pool North Young		Dedicated Acreage: 40		Acres

- Outline the acreage dedicated to the subject well by colored pencil or machine marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 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 _____
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
Printed Name
S. L. Atnipp
Position
Drilling Superintendent
Company
Marathon Oil Company
Date
9/18/90

SURVEYOR CERTIFICATION

I hereby certify that the location shown on this plat is the true and correct location of actual survey 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
Signature of Professional Surveyor
Professional Surveyor

Certificate No. JOHN W. WEST, 676
RONALD J. EDSON, 3239