

NEW MEXICO
OIL CONSERVATION COMMISSION

Gas Well Plat

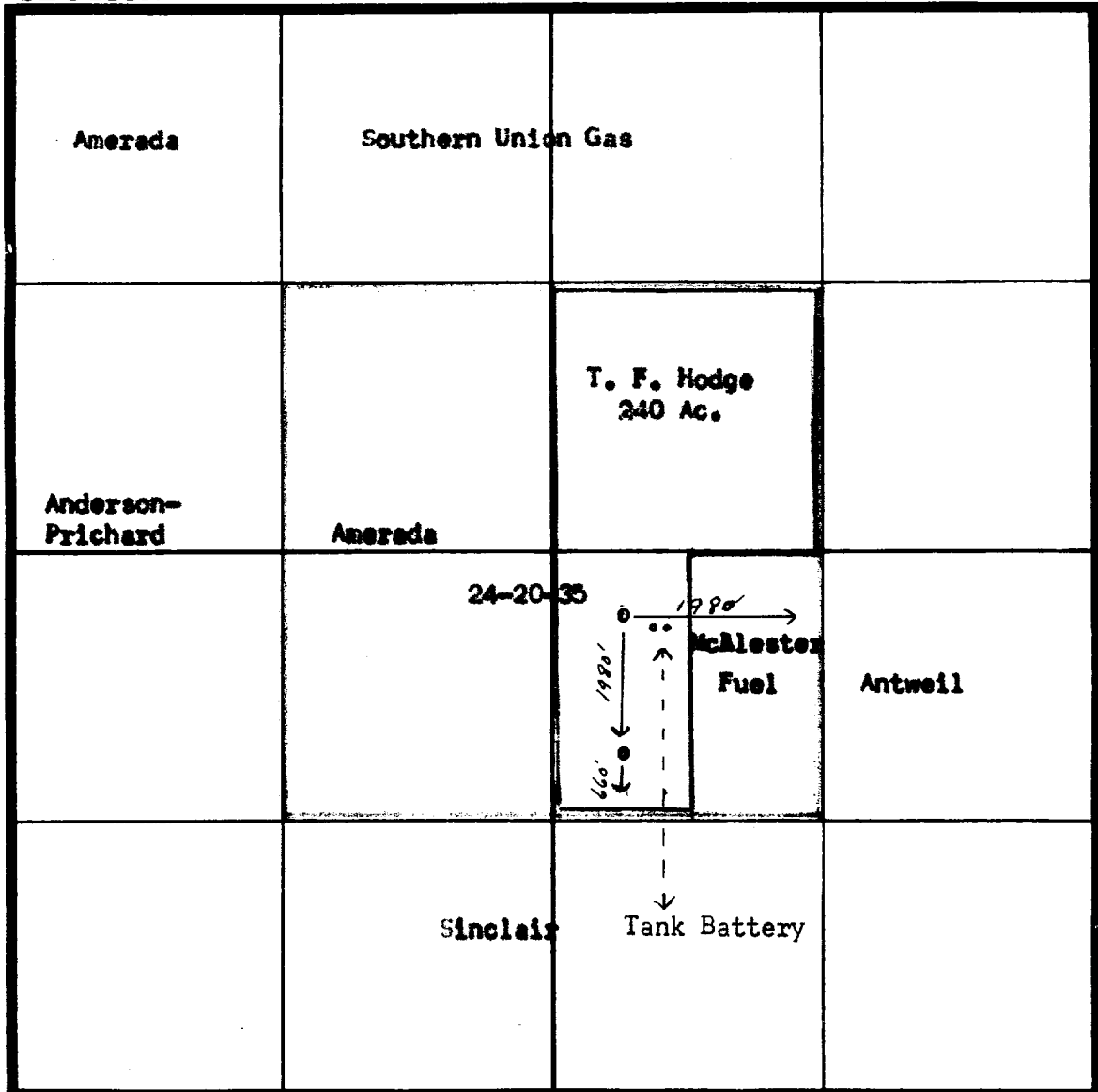
Date _____

Operator _____ Lease _____ Well No. _____

Name of Producing Formation _____ Pool _____

No. Acres Dedicated to the Well _____

SECTION _____ TOWNSHIP _____ RANGE _____



I hereby certify that the information given above is true and complete to the best of my knowledge.

Name _____
Position _____
Representing _____
Address _____

(over)

INSTRUCTIONS

1. Is this gas well a dual completion? Yes ____ No ____.
2. If the answer to Question 1 is Yes, are there any other dually completed wells within the dedicated acreage? Yes _____ No _____

A separate plat must be filed for each gas well, outlining the area dedicated to such well and showing the location of all other wells (oil and gas) within the outlined area.

Mail in duplicate to the district office for the district in which the well is located.