

District I
PO Box 1900, Hobbs, NM 88241-1900
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

1 API Number 30 025 08746		2 Pool Code 76480		3 Pool Name Eumont Yates 7 Rivers Queen	
4 Property Code 003107		5 Property Name State J-2			6 Well Number 7
7 OGRID No. 005073		8 Operator Name Conoco, Inc.			9 Elevation

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
J	2	22-S	36-E		1980	South	1980	East	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

12 Dedication Acres 480	13 Joint or Infill	14 Consolidation Code	15 Order No.
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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

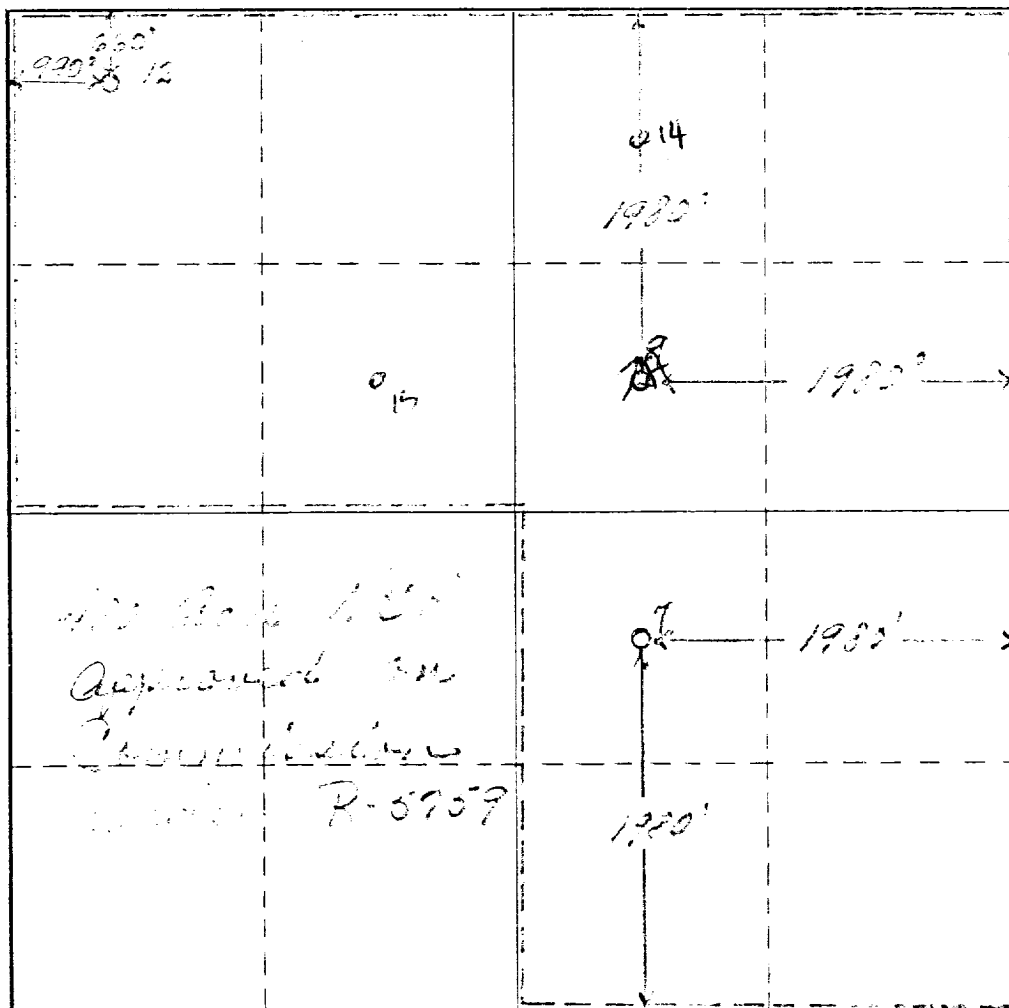
<div>16</div> <div>#12</div> <div>#14</div> <div>#15</div> <div>#16</div> <div>#7</div> <div>#17</div>				<div>17 OPERATOR CERTIFICATION</div> <div>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</div> <div></div> <div>Signature Ann E. Ritchie</div> <div>Printed Name Regulatory Agent</div> <div>Title</div> <div>9-6-95</div> <div>Date</div>	
				<div>18 SURVEYOR CERTIFICATION</div> <div>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.</div> <div>Date of Survey</div> <div>Signature and Seal of Professional Surveyor</div>	
				Certificate Number	

Form C-102
Supersedes C-128
Effective 1-1-65

Operator CONTINENTAL OIL COMPANY		Lease STATE J-2		Well No. 7
Unit Letter J	Section 2	Township 22 SOUTH	Range 36 EAST	County LEA
Actual Postage Location of Well: 1990 feet from the SOUTH line and 1930 feet from the EAST line				
Ground Level Elev. 352.1	Producing Formation YATES & GURCH	Foot EUMENT YATES TRRS. ON.	Dedicated Acreage: 480 Acres	

- ☐ Yes ☐ No If answer is "yes," type of consolidation _____

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 interests, has been approved by the Commission.



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

Name Bern A. Lee
Position Adm. Secy.
Company Continental Oil Co.
Date 7-7-72

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 _____

Registered Professional Engineer
and/or Land Surveyor

Certificate No.

