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

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## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-102 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

## OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

WELL LOCATION AND ACREAGE DEDICATION PLAT 1000 Rio Brazos Rd., Aztec, NM 87410 All Distances must be from the outer boundaries of the section Well No. Southwest Royalties, Inc. cities Federal LC-030132(b) 3 Unit Letter Section Township County 20 22 South 36 East Lea NMPM Actual Footage Location of Well: North feet from the line and 2310 feet from the West Dedicated Acreage: Ground level Elev. Producing Formation Pool 3565' Yates Seven Rivers Jalamat Yates Seven Rivers 1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below. 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty). 3. 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.? No Yes 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 neccessary. 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 2310 contained herein in true and complete to the best of my knowledge and/belief, Signature Printed Name Ann E. Ritchie Position Agent Company Southwest Royalties.Inc Date <u>6-15-93</u> 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 supervison, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed Signature & Seal of Professional Surveyor Certificate No.

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