

Table 1. *Salmonella* serotypes and their associated diseases. The table lists the serotypes and the diseases they are associated with, such as enteric fever, gastroenteritis, and typhoid fever.

Date of first allowable on allowable claim		7/17/86	
El Paso Natural Gas	1981	ECMONT	
Comoco Inc.	1985	State 6	
Chas. L. L.	1985	21	Range 36
2.0	Revised Acceage	0	Difference -200
1.25	Revised Acceage Factor	0	Difference -1.25
	Revised Deliverability		Difference
	Revised A x D Factor		Difference

CCD District No. 1

[illegible]

R. I. GILBERT, Division Director

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NEW MEXICO OIL CONSERVATION COMMISSION
Well Location and Acreage Dedication Plat

Section A.

Date Sept. 02th, 1959

Operator Continental Oil Co. Lease State D-11
Well No. 1 Unit Letter I Section 11 Township 21 N Range 36 NMPM
Located 1980 Feet From South Line, 660 Feet From West Line
County Lea G. L. Elevation 3601 Dedicated Acreage 200 Acres
Name of Producing Formation Vatas & Seven Rivers Pool Dumont

1. Is the Operator the only owner* in the dedicated acreage outlined on the plat below?
Yes _____ No x _____.
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes x No _____. If answer is "yes," Type of Consolidation Operational Agreement
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner

Land Description

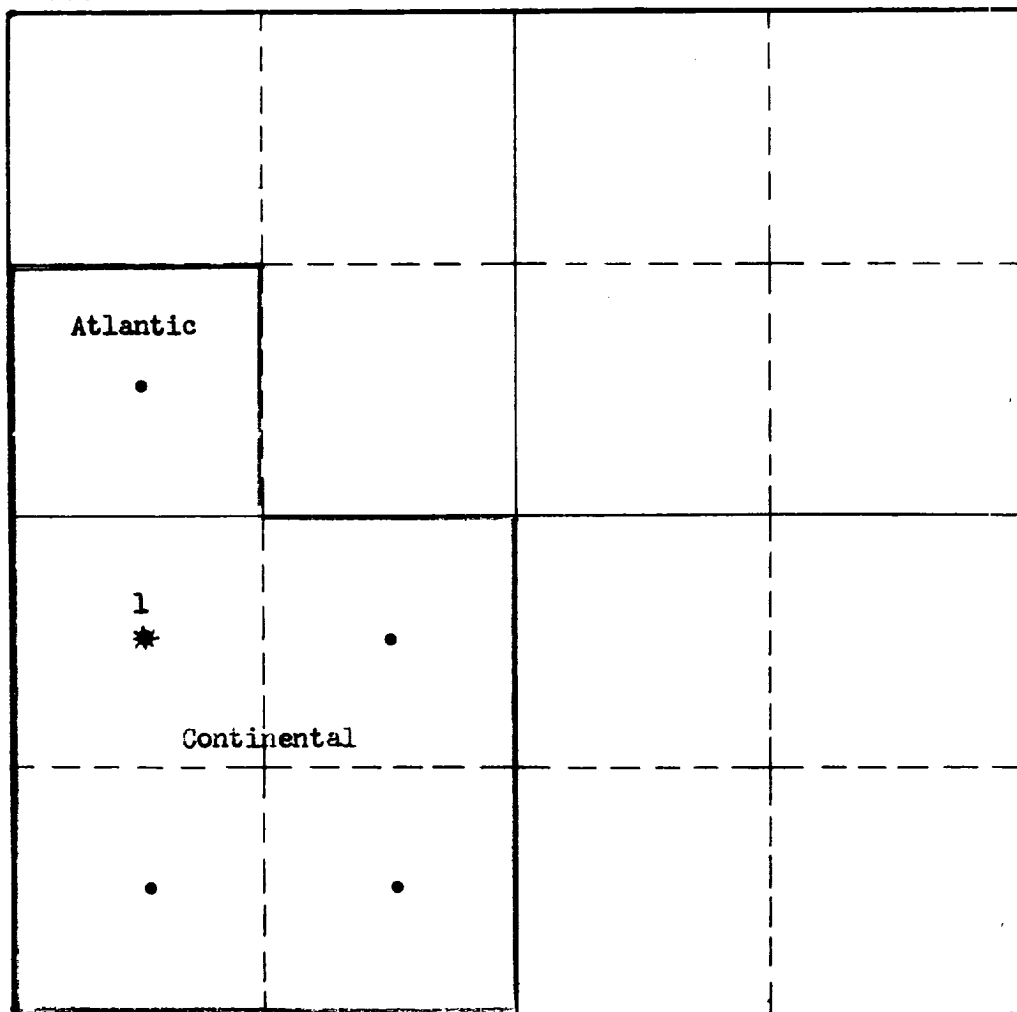
Continental Oil Co.

SW/4 of Section 11-21-36.

Atlantic Rfg. Co.

SW/4 of NE/4 of section 11-21-36.

Section B



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

Continental Oil Co.

(Operator)

J. H. R. Atlantic
(Representative)

Box 427, Hobbs, N.M.

Address

This is to certify that the well location shown on the plat in Section B 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

Certificate No. _____

(See instructions for completing this form on the reverse side)

INSTRUCTIONS FOR COMPLETION:

1. Operator shall furnish and certify to the information called for in Section A.
2. Operator shall outline the dedicated acreage for both oil and gas wells on the plat in Section B.
3. A registered professional engineer or land surveyor registered in the State of New Mexico or approved by the Commission shall show on the plat the location of the well and certify this information in the space provided.
4. All distances shown on the plat must be from the outer boundaries of Section.
5. If additional space is needed for listing owners and their respective interests as required in question 3, Section A, please use space below.

* "Owner" means the person who has the right to drill into and to produce from any pool, and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1953 Comp.)

NEW MEXICO
OIL CONSERVATION COMMISSION

Gas Well

RECEIVED
DEC 17 1953

Date 11/4/53

Continental Oil Co.

Operator

State D-11

Lease

1 (Bradenhead)

Well No.

OIL CONSERVATION COMMISSION
HOBBS OFFICE

Name of Producing Formation Yates & 7-Rivers Pool Eumont.

No. Acres Dedicated to the Well 160

SECTION 11 TOWNSHIP 21 RANGE 36

1 ☼	4 ●		
2 ●	3 ●		

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

Name W. H. H. H.

Position Dist. Supt.

Representing Continental Oil Co.

Address Box 427 Hobbs, N. M.

(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.