

District I  
PO Box 1988, Hobbs, NM 88241-1988  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Grande Rd., Alamogordo, NM 87001  
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-10  
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

|                            |                                           |                    |                                                                                    |                      |
|----------------------------|-------------------------------------------|--------------------|------------------------------------------------------------------------------------|----------------------|
| API Number<br>30-025-08557 |                                           | Pool Code<br>76480 | Well Name<br>Eumont X-20's GR-DW                                                   |                      |
| Property Code<br>002827    | State A                                   |                    | Property Name<br>Eumont X-20's P. 1 & 2 & 3 & 4 & 5 & 6 & 7 & 8 & 9 & 10 & 11 & 12 |                      |
| OGRID No.<br>004537        | Operator Name<br>Citation Oil & Gas Corp. |                    |                                                                                    | Well Number<br>2     |
|                            |                                           |                    |                                                                                    | Elevation<br>3591 DF |

| 10 Surface Location |         |          |       |         |               |                  |               |                |
|---------------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|
| UL or lot no.       | Section | Township | Range | Lot 1/4 | Feet from the | North/South line | Feet from the | East/West line |
| A                   | 12      | 21S      | 35E   |         | 330           | North            | 330           | East           |
|                     |         |          |       |         |               |                  |               | County<br>Lea  |

| 11 Bottom Hole Location If Different From Surface |         |          |       |         |               |                  |               |                |
|---------------------------------------------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|
| UL or lot no.                                     | Section | Township | Range | Lot 1/4 | Feet from the | North/South line | Feet from the | East/West line |
|                                                   |         |          |       |         |               |                  |               |                |
|                                                   |         |          |       |         |               |                  |               | County         |

| 12 Dedication Acres | 13 Joint or Infill | 14 Commencement Code | 15 Order No. |
|---------------------|--------------------|----------------------|--------------|
| 160                 |                    |                      |              |

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

|    |  |  |  |  |      |                                                                                                                                                                                                                                                                                                                                            |
|----|--|--|--|--|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 16 |  |  |  |  | 330  | 17 OPERATOR CERTIFICATION<br>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.<br><br>Signature<br><u>Sharon Ward</u><br>Printed Name<br><u>Sharon Ward</u><br>Title<br><u>Prod. Reg. Supv.</u><br>Date<br><u>1-31-95</u>                                                |
|    |  |  |  |  | 2    |                                                                                                                                                                                                                                                                                                                                            |
|    |  |  |  |  | 660  |                                                                                                                                                                                                                                                                                                                                            |
|    |  |  |  |  | 1    |                                                                                                                                                                                                                                                                                                                                            |
|    |  |  |  |  | 0880 | 18 SURVEYOR CERTIFICATION<br>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.<br><br>Date of Survey<br>Signature and Seal of Professional Surveyor:<br><br>Certificate Number |
|    |  |  |  |  |      |                                                                                                                                                                                                                                                                                                                                            |
|    |  |  |  |  |      |                                                                                                                                                                                                                                                                                                                                            |
|    |  |  |  |  |      |                                                                                                                                                                                                                                                                                                                                            |