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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form O-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
E-1732	
7. Unit Agreement Name	
8. Farm or Lease Name	
State WE "H"	
9. Well No.	
3	
10. Field and Pool, or Wildcat	
Turnout	
12. County	
Lea	
18. Proposed Depth	19A. Formation
4000'	7 Rivers Queen
20. Rotary or C.T.	
Rotary 0-4000'	
21. Elevations (Show whether DE, RT, etc.)	22. Approx. Date Work will start
3596' GF	4-2-73

1a. Type of Work	
b. Type of Well	
DRILL <input checked="" type="checkbox"/>	DEEPEN <input type="checkbox"/>
OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>
2. Name of Operator	
Millard Deck	
3. Address of Operator	
P.O. Box 1047, Lunice, New Mexico 88231	
4. Location of Well	
UNIT LETTER K	LOCATED 2310 FEET FROM THE West LINE
AND 2970 FEET FROM THE North LINE OF SEC. 2 TWP. 21S RGE. 35E NMPM	
19. Proposed Depth	
4000'	
19A. Formation	
7 Rivers Queen	
20. Rotary or C.T.	
Rotary 0-4000'	
21. Elevations (Show whether DE, RT, etc.)	
3596' GF	
21A. Kind & Status Plug, Bond	
Blanket on File	
21B. Drilling Contractor	
Leatherwood Drilling	
22. Approx. Date Work will start	
4-2-73	

PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8 5/8"	24#	300'	300	Circulate
7 7/8"	5 1/2"	14#	4000'	250	2200

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed Millard Deck Title Owner-Operator Date 4-1-73

(This space for State Use)

APPROVED BY [Signature] TITLE DIRECTOR DATE 4-1-73

CONDITIONS OF APPROVAL, IF ANY:



**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

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

All distances must be from the outer boundaries of the Section

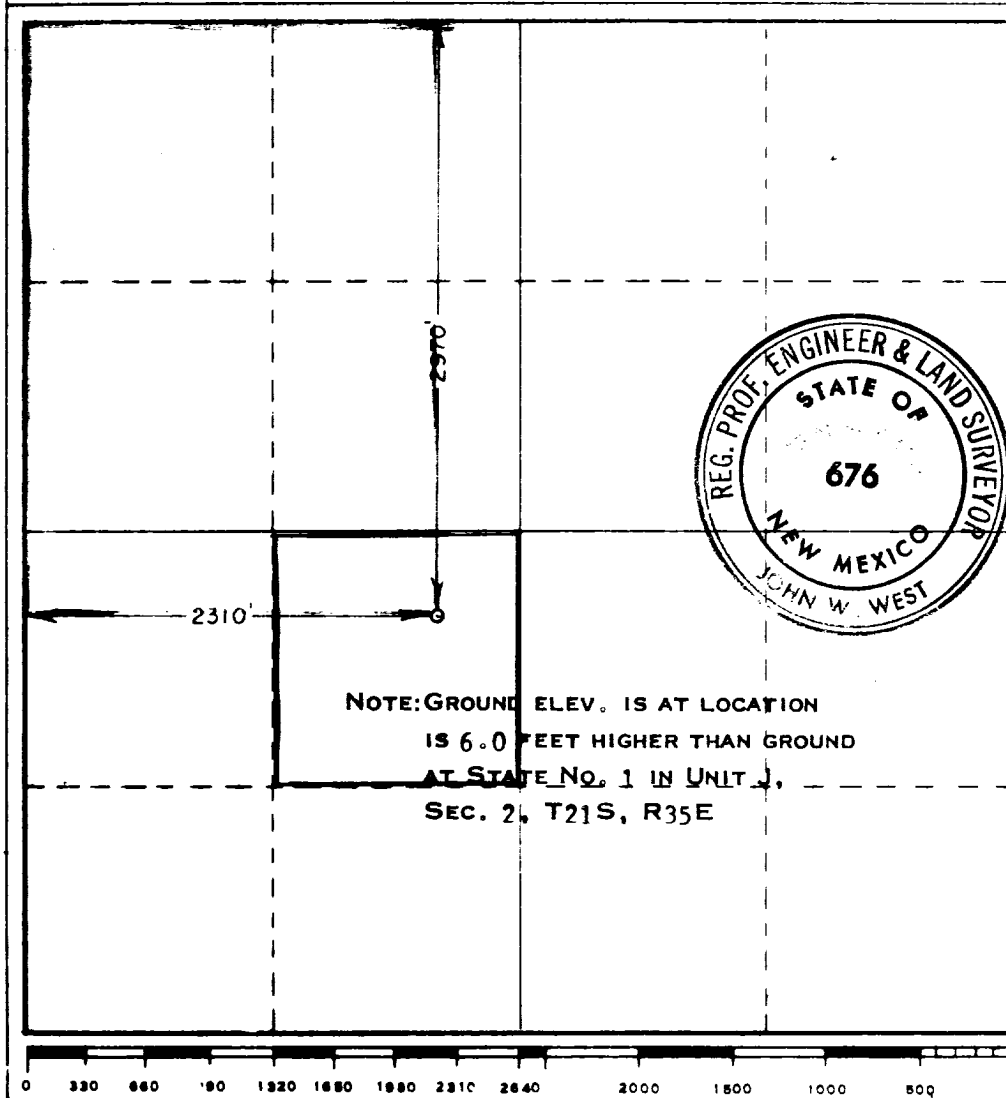
Operator MILLARD DECK OIL CO.			Lease W E H		Well No. 3
Unit Letter K	Section 2	Township 21 SOUTH	Range 35 EAST	County LEA	
Actual Footage Location of Well: 2970 feet from the NORTH line and 2310 feet from the WEST line					
Ground Level Elev. 3596	Producing Formation 7 Rivers Queen		Pool Bumont	Dedicated Acreage 40 Acres	

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 interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No 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 necessary.) _____

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.



CERTIFICATION

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

Name <i>Millard Deck</i>
Position Owner - Operator
Company Millard Deck
Date 4-1-73

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 MARCH 30, 1973
Registered Professional Engineer and/or Land Surveyor <i>John W West</i>
Certificate No. 676

NOTES, G. M.

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