

District I  
1625 N. French Dr., Hobbs. NM 88240

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

Revised February 21, 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 <u>30-025-09295</u>		2 Pool Code <u>79240</u>		3 Pool Name <u>Jalmit: Tam. Yates 7Rrs (Pro Gas)</u>	
4 Property Code <u>24669</u>		5 Property Name <u>State A A/C 1</u>			6 Well Number <u>81</u>
7 OGRID No. <u>162791</u>		8 Operator Name <u>Raptor Resources</u>			9 Elevation

## 10 Surface Location

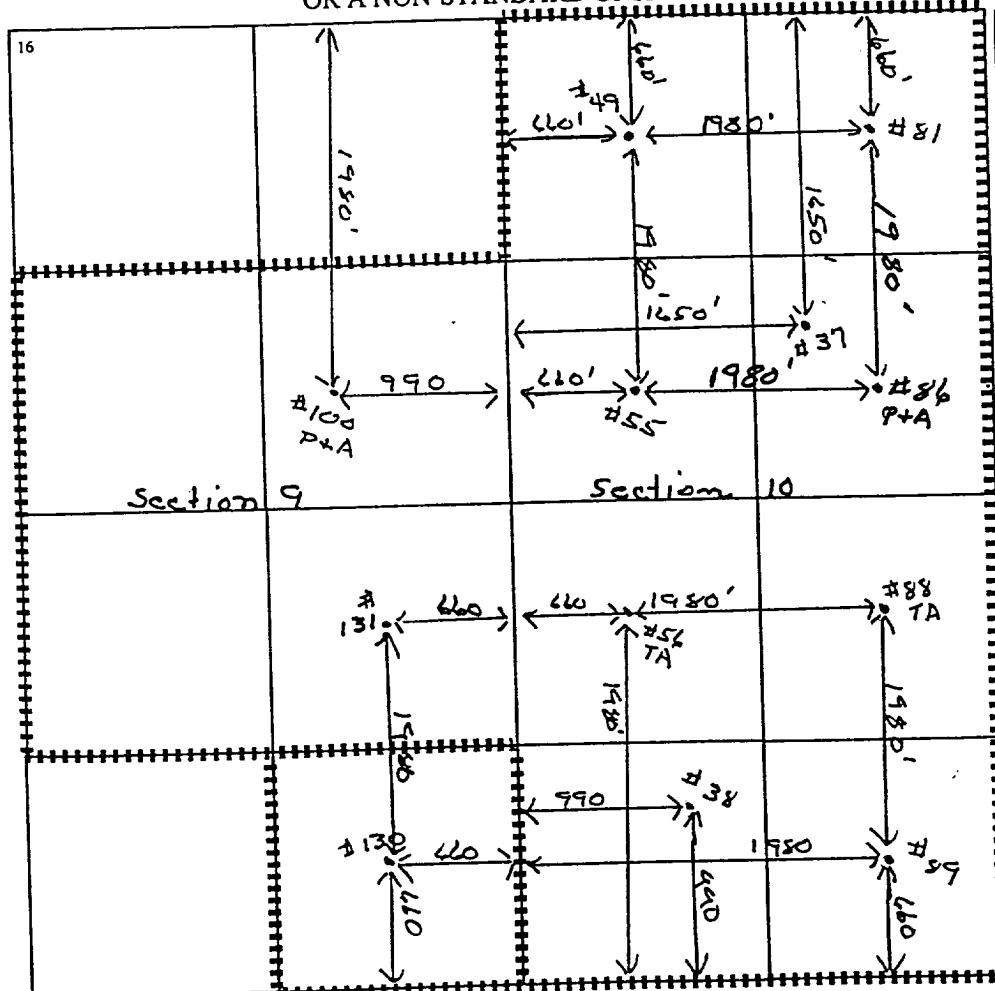
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<u>C</u>	<u>10</u>	<u>23S</u>	<u>36E</u>		<u>660</u>	<u>North</u>	<u>1980</u>	<u>West</u>	<u>Lea</u>

## 11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres <u>48</u>	13 Joint or Infill	14 Consolidation Code	15 Order No. <u>NSP-1862(SD)</u>
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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



## 17 OPERATOR CERTIFICATION

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

Bill R. Keathly  
Signature

Bill R. Keathly

Printed Name

Regulatory Agent

Title

1-16-03

Date

## 18 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 supervision, and that the same is true and correct to the best of my belief.

Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number