Form C-102

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

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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

|  | WEL  | L LO        | CATION            | NAND AC               | CREAGE DEI  | DICAT                                   | ION PL  | ,AT           |                                       |           |  |  |  |
|--|--|-------------|-------------------|-----------------------|---|---|---|---------------|---------------------------------------|-----------|--|--|--|
|  |  |             |                   | 2 Pool Code 3 Pool Na |   |   |   |               |                                       |           |  |  |  |
| 30-025-  | 79240 Jalmat: Tan-Yates-7 rvrs (Pro Gas)               |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
| 4 Property Code 5 Property Name  |  |             |                   |                       |   |   | 6 Well Number   |               |                                       |           |  |  |  |
| 100000   |  |             |                   |                       | "A" A/C 1   |   |   |               | 65                                    |           |  |  |  |
|  |  |             |                   | -                     | rator Name  |   |   | 9 Elevation   |                                       |           |  |  |  |
| 102/91   | 162791 Raptor Resources                                |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
| 10 Surface Location<br>U. or bit no. Section Township Range Lot Idn Feet from the North/South Inc. Feet from the East three the Inc. |  |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
| D 23   |  | -           | LOCION            |                       |   |   | eet from the East/We  |               | et line                               | County    |  |  |  |
| <u> </u>   | 238  | 36E         | torn II.          | 660                   |   | Jorth 760 West                          |   |               |                                       | Lea       |  |  |  |
| UL or lot no. Section  | Township   | Range J     | Lot Idn           | Feet from the         | If Different I  |   | urface  | East/We       |                                       |           |  |  |  |
|  | 1  |             |                   |                       |   |   |   |               | ut IIAO                               | County    |  |  |  |
| 12 Dedicated Acres 13 Join   | nt or Infit 14 Co                                      | nsolidation | Code 15 (         | Order No.             | <u></u>   |   |   |               | · · · · · · · · · · · · · · · · · · · |           |  |  |  |
| 320 NSL-3023-A (SD)  |  |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
| NO ALLOWABLE   | WILL BE AS   | SIGNE       | TO THI            | S COMPLET             | ION UNTIL AL  | L INTER                                 | ESTS H  | VE BEF        | IN CON                                |           |  |  |  |
|  | OR A NO  | ON-STA      | NDARD             | UNIT HAS I            | BEEN APPROVI  | D BY T                                  | HE DIVI   | SION          |                                       | SOLIDATED |  |  |  |
|  |  |             | 440               | <u>↑</u>              | T Tê  |   | 17 OPER   | ATOR          | CERT                                  | IFICATION |  |  |  |
| E LS   |  |             | x1                | <b>∓</b>   ı          | I hereby certify that the information contained herein is |   |   |               |                                       |           |  |  |  |
| × 760 × 17   | $\begin{array}{c c c c c c c c c c c c c c c c c c c $ |             |                   |                       |   |   |   | st of my kn   | www.edge and belief                   |           |  |  |  |
| ₹  | i c  | ·           |                   |                       |   |   |   |               |                                       |           |  |  |  |
| 14.4   | 10 So  |             |                   |                       |   | 1 I I I I I I I I I I I I I I I I I I I |   |               |                                       |           |  |  |  |
| <u> </u>   |  |             |                   |                       |   |   | Bieg & Kearly   |               |                                       |           |  |  |  |
| 4.50   | J.   |             | Te .              |                       | 150   |   | ignature  | ,             |                                       |           |  |  |  |
| 27   |  |             | 2627              |                       |   |   | Bill R. Keathly   |               |                                       |           |  |  |  |
| KULU V B   |  | ار ا<br>بعد |                   | 230                   | 125   |   | Regulatory Agent  |               |                                       | ent       |  |  |  |
| 12.  |  |             | ***               |                       |   |   | Title 4-11-00   |               |                                       |           |  |  |  |
|  |  |             |                   |                       |   | I.                                      |   |               |                                       |           |  |  |  |
| ***********  |  | *****       | <b>+</b> ******** | ******                | *****   | .                                       | • CIIDX   | EVOD          | OCDT                                  |           |  |  |  |
|  |  |             |                   |                       |   |   | 18 SURVEYOR CERTIFICATION   |               |                                       |           |  |  |  |
|  |  |             |                   |                       |   |   | I hereby certify that the well location shown on this plat<br>was plotted from field notes of actual surveys made by me |               |                                       |           |  |  |  |
|  |  |             |                   |                       |   | 01                                      | or under my supervision, and that the same is true and correct to the best of my belief.                                |               |                                       |           |  |  |  |
|  |  |             |                   |                       |   |   |   | st of my be   | nej.                                  |           |  |  |  |
|  |  |             |                   |                       |   | Da                                      | Date of Survey  |               |                                       |           |  |  |  |
|  |  |             | ·                 | <del> </del>          |   | Si                                      | gnature and   | Seal of Profe | essional Su                           | irveyor:  |  |  |  |
|  |  |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
|  |  |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
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|  |  |             |                   |                       |   |   |   |               |                                       |           |  |  |  |
|  |  |             |                   |                       | C   | Certificate Number                      |   |               |                                       |           |  |  |  |

State of New Mexico Submit to Appropriate District Office Energy, Minerals and Natural Resources Department Form C-102 State Lease - 4 copies Revised 1-1-89 Fee Lease - 3 copies **OIL CONSERVATION DIVISION** DISTRICT I P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 Santa Fe, New Mexico 87504-2088 <u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210 DISTRICT III WELL LOCATION AND ACREAGE DEDICATION PLAT 1000 Rio Brazos Rd., Aztec, NM 87410 All Distances must be from the outer boundaries of the section Operator Lease Well No. Clayton Williams Energy, Inc. State A A/C 1 Unit Letter Section Township 65 Range County D 23 23S 36E Actual Footage Location of Well: NMPM Lea 760 feet from the West line and 660' Ground level Elev. feet from the North Producing Formation line Pool Dedicated Acreage: ---N/A Yates Jalmat Tansill Yates 7 Rivers 1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below. 320 Acres 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.? 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 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 5'60' I hereby certify that the information 3 contained herein in true and complete to the best of my knowledge and belief. 2310 **\***109 #98 Signanu 280 Ş 2080 Kolrn Printed Name Robin S. McCarley Position 1650' \*#27 650 ちょ Production Analyst Company 23101 ·#72 Clayton Williams Energy, Inc. #84 Date #kos 09/09/93 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. 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0 15L 3023 a 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

| 1   |                                       |                    |   |              |  |               |                 |                | 56425-   | 7394    |  |  |
|---|---------------------------------------|--------------------|---|--------------|--|---------------|-----------------|----------------|--|---------|--|--|
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| District Office Energy, Minerals  |                                       |                    |   |              | tate of New Mexico<br>and Natural Resources Department |               |                 |                | Form C-102                                       |         |  |  |
| Fee Lease - 3 copies  | с <b>і</b><br>Г                       |                    |   |              |  |               |                 |                | Revised 1-1-85                                   | ,       |  |  |
| DISTRICT I<br>P.O. Box 1980, Hob  | be NM 88240                           |                    | OIL CONS  | ERVA         | TION   | DIVIS         | ION             |                |  |         |  |  |
| DISTRICT  |                                       |                    | Santa Fe,   | P.O. Bo      | 2088   | 504 0000      |                 |                |  |         |  |  |
| P.O. Drawer DD, An  | 1ceia, NM 8821                        | 0                  | balla I C,  | 110 4 1410   | 5000 87  | 504-2088      |                 |                |  |         |  |  |
| DISTRICT III<br>1000 Rio Brazos Rd  | Aziec. NM 87                          | WEL                | L LOCATION A  |              | REAGE  |               |                 | _              |  |         |  |  |
| Operator  |                                       | /                  | UI Distances must be                                | from the     | outer boun   | daries of the | ION PLAT        | -              |  |         |  |  |
| -   | _                                     |                    |   | Lease        |  |               | section         |                |  |         |  |  |
| Unit Letter   | Smussen O                             | perating,          |   | State        | e A A/C  |               |                 |                | Well No.   | ]       |  |  |
| D   |                                       | Township           |   | Range        |  |               |                 | County         | 65   |         |  |  |
| Actual Footage Loca   | 23<br>Lion of Well:                   | 22                 | <u>2</u> S  | L            | 36 E   |               | NMPM            | Le             | ea   |         |  |  |
| 660   | feet from the                         | North              |   |              | 760  |               |                 |                |  |         |  |  |
| Ground level Elev.  |                                       | ucing Formation    | line and  | Pool         | 760  |               | fect from th    | west           | line   |         |  |  |
|   |                                       | Vatar              |   |              |  |               |                 |                | line<br>Dedicated Acreage:                       |         |  |  |
| 1. Outline  | the acreage dedic                     | cated to the subjo | ct well by colored peak                             | Jalma        | t-TNSL   | -YTS-7R       |                 |                | 320 Ages   |         |  |  |
| 2. If more  | than one lease is                     | dedicated to at -  |   |              |  | me plat belo  | w.              |                |  |         |  |  |
|   |                                       | Contract to the    | well, outline each and                              | identify the | ownenthip  | thereof (both | as to working   | interest and n | (vilev)  |         |  |  |
| L more t<br>unitization   | han one lease of                      | different owners   | nip is dedicated to the                             | well, have   | the interest   |               |                 |                | ·)-·;).  |         |  |  |
|   | Yes                                   | No                 | If an annual to Barra                               |              |  | A STI OMBELE  | peca consoliq   | ated by comm   | unitization,                                     |         |  |  |
| If answer is  | "no" list the ow                      | ners and tract des | If answer is "yes" type<br>criptions which have a   | Chially has  | dation   |               |                 |                |  |         |  |  |
|   |                                       |                    |   |              |  | COL (USC TOYO | anse nide of    |                |  |         |  |  |
| or until a po   | o-standard unit,                      | eliminating such   | l all interests have bee<br>interest, has been appr | a consolida  | ucd (by con  | munitization, | unitization, fo | and-moline     | or otherwise b                                   | ]       |  |  |
| (Contraction of the Contraction |                                       |                    | the beed appr                                       | oved by the  | Division.  |               |                 | inter process, | , or otherwise)                                  |         |  |  |
|   |                                       |                    |   |              |  |               |                 |                |  |         |  |  |
|   |                                       | - 09               | 660.  |              |  |               |                 | UPERATO        | R CERTIFICATION                                  |         |  |  |
| 760' (20) 145   | 50' I                                 | 1                  | ē   |              |  |               | Cont            | annea herein   | ertify that the information true and complete to | ation   |  |  |
| 245   | <u> </u>                              |                    |   |              |  | <u></u>       | best.           | of my browled  | lee and belief.                                  | ine     |  |  |
|   | 650                                   | .5                 | *9B   |              | i<br>I   |               | Sign            |                | $\square$  | _       |  |  |
|   |                                       |                    |   | 1650'        |  | 2080-         |                 |                |  |         |  |  |
|   |                                       |                    | ř.  | -            | i  | 20            | Printe          | ed Name        |  |         |  |  |
| 2   | · · · · · · · · · · · · · · · · · · · |                    | ╺┽╍┽╍╼  |              | ·+   | ·             |                 | ay D. Cł       | aroki  |         |  |  |
| 145-1   |                                       |                    |   |              |  |               | Poetu           | on 01          | IEISKI   |         |  |  |
| 165.0 1   | 165 <b>0</b> <sup>1</sup>             |                    |   |              | 1650   |               |                 |                | Agent  |         |  |  |
|   | 21 Ste                                |                    |   |              | Comp   |               |                 |                | zoy  |         |  |  |
|   |                                       |                    | *84   | 2 310'       | 1  | V 660         | Hal             | J. Rasm        | nussen Operatin                                  | g, Inc. |  |  |
|   |                                       |                    |   |              |  | <b>#105</b>   | Date            |                |  |         |  |  |
|   |                                       | SE                 | <u>c</u> tion                                       |              | i  |               |                 | 1/23/          | 91   |         |  |  |
|   | 1                                     |                    | 23  | • ··· ·      |  | <u></u>       | s s             | URVEYOF        | R CERTIFICATION                                  |         |  |  |
|   | Ì                                     |                    | 1   |              | l  |               | I here          | by certify th  | at the well location sho                         |         |  |  |
|   | 1                                     |                    |   |              | t i  |               |                 | is plat was j  | plotted from Gold mater                          | -       |  |  |
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|   | i                                     |                    |   |              | ļ  |               | belief.         |                | -,, www.cage a                                   | na      |  |  |
|   |                                       |                    |   |              | 1  |               | Date S          | Surveyed       |  | _       |  |  |
|   | 1                                     |                    |   |              | <u> -</u>  |               | -}              |                |  |         |  |  |
|   | 1                                     |                    |   |              | ł  |               | Signat          | ure & Seal of  |  |         |  |  |
|   | I                                     |                    | 1   |              |  |               | Froice          | cional Surveyo | or   |         |  |  |
|   | 1                                     |                    |   | 1            |  |               |                 |                |  |         |  |  |
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|   |                                       | ·                  | 1   | l<br>T       |  |               | Certifie        | ale No.        | ·····  | _       |  |  |
| 330 660 990   |                                       |                    |   |              |  |               |                 |                | -320ac NSP                                       | ,       |  |  |
| 660 990   | 1320 1650                             | 1980 2310 2        | 540 2000.   | 1500         | 1000   | 500           |                 |                | under wsr  |         |  |  |
|   |                                       |                    |   |              |  |               | ~ 1             |                |  | 1       |  |  |

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