District I PO Box 1988, Hobbs, NM 88241-1988 District [] PO Drawer DD, Artesia, NM 88211-6719 District III 1000 Rio Brazos Rd., Aztoc, NM 27410 District [V

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, 199

Instructions on bac Submit to Appropriate District Offic State Lease - 4 Copie

Fee Lease - 3 Copie

| PO Box 2008, S | anta Fe, N | M 87504-1 | 2066 | | | | | | | (| ☐ AM | ENDED REPO | |
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| | . == | | W | ELL LO | OCATI | ON AND | AC | REAGE DEI | DICATION P | LAT | | | |
| API Number 30-025-10012 | | | | | ¹ Pool Code | | | ³ Pool Name | | | | | |
| * Property Code | | | | | 06660 | | Blinebry Oil & Gas | | | | | | |
| 19152 | | | | Co | orriga | | sperty Name | | | | * Well Number | | |
| 'OGRID No. 004874 | | | Operator Name | | | | | | Name | | | ? * Elevation | |
| 004874 | <u> </u> | | Colli | ins & W | lare, Ind | | • . | | | 3447 ! GR | | | |
| | | , | | | | 10 Surf | ace | Location | | | <u> </u> | | |
| UL or lot so. H | Section O. | Town | - 1 | Range | Let ida | Fost from | the, | North/South Eas | Feet from the | East/Wes | t Kae | County | |
| | 04 | 22 | 5 | 37E | <u> </u> | 1980 | | North | 990 | East | | Lea | |
| UL or lot so. | Section | T+ | Bottom Hole Location If Different From Surface | | | | | | | | | | |
| OE 57 EX 25. | 300,000 | Towns | up | Range | Lot Ida | Feet from | the | North/South Lac | Feet from the | East/West | Ene | County | |
| " Dedicated Acr | us '' Joint | ot [B[I]] | " c | oseolidatio | e Code " | Order No. | | | <u> </u> | <u> </u> | | | |
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| | | | | | | | - | | true and comp | lese so the be | st of my | browledge and belief | |
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| | | | | | | | | | Signature) could | | | | |
| | | | | | | | | | Printed Name | ianne S | e Sumrall | | |
| | | | | | | | | 990' | 41 | Production Supervisor | | | |
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| | | | | | | | | | Date | otember | _51 | 996 | |
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| | - | | | | | | İ | | me or under my | supervision. | and that | surveys made by the same is true | |
| | | | | | | | 1 | | and correct to a | he best of my | belief. | | |
| | | | | | | | | | Date of Survey | | | | |
| | | | | | | | + | | Signature and Sc | cal of Profess | ional Sur | veyer. | |
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