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## State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 Form C-102 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## WELL LOCATION AND ACREAGE DEDICATION PLAT

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

| OO NO DIEDO I   | <b>, ,</b>             | All Distan                   | ces must be it  | om the ooter     | DOUINIAIRES   | OF UTO SECUOIT         |  | CWGIONG.   |
|-----------------|------------------------|------------------------------|---|------------------|---------------|------------------------|--|--|
| perator         |                        | ease                         |   |                  |               | Well No.               |  |  |
| Dawson C        | perating Co            | ompany                       |   | New Mex          | cico "M       | " State                |  | 11   |
| it Letter       | Section                | Township                     |   | Range            |               |                        | County   |  |
| J               | 19                     | 225                          |   | · 37E            |               | NMPM                   | Le   | a  |
| _               | cation of Well:        | L                            |   |                  |               |                        |  |  |
| 1980            | feet from the          | South                        | line and  | 1980             |               | feet from              | the East   | line   |
| ound level Elev | Produ                  | ucing Formation              | ino una   | Pool             |               |                        |  | Dedicated Acreage:   |
|                 |                        |                              |   | Jalmat           | т-V-SR        |                        |  | 40 Acres   |
| 3416'           | Yate                   | cated to the subject well b  | v colored penc  | l or hachure m   | arks on the   | plat below.            |  |  |
| 2. If mo        | ore than one lease is  | dedicated to the well, our   | tline each and i  | dentify the own  | nership there | of (both as to worki   |  |  |
| _               | 1 V                    | No If answ                   | er is "yes" type  | of consolidation | on            |                        |  |  |
| If answ         | er is "no" list the ov | mers and tract description   | s which have a  | ctually been co  | nsolidated.   | (Use reverse side of   | •  |  |
|                 | 16                     |                              |   |                  |               |                        |  | a or otherwise)  |
| No allo         | wable will be assign   | ed to the well until all int | ieresis have bee  | n consolidated   | (by commu     | ntization, unitization | i, ioicai-pooiii                                   | g, or oaler wise,  |
| or until        | a non-standard unit    | eliminating such interest    | , mas occir appr  | Ored by the B.   | 11000         | T                      |  |  |
|                 |                        |                              | <del></del>   |                  |               |                        |  | OR CERTIFICATION   |
|                 |                        |                              |   | !                |               |                        | I hereby   | certify that the informati   |
|                 | 1                      |                              |   |                  |               |                        |  | in in true and complete to t   |
|                 | i                      |                              |   |                  |               | L                      | ast of my know                                     | ledge and Velief.  |
|                 | <u> </u>               | l                            |   | i                |               | 1 L                    | X  | /hamma   |
|                 | !                      | {                            |   |                  |               | 2                      | gnature  | •  |
|                 | į.                     |                              |   | i                |               |                        | Joe R. I   | awson  |
|                 |                        |                              |   |                  |               | F                      | rinted Name  |  |
|                 | 1                      |                              |   |                  |               |                        | Vice Pre   | esident  |
|                 |                        |                              |   |                  |               | <b></b>                | osition  |  |
|                 | ł                      |                              |   |                  |               | '                      |  | perating Company   |
|                 | į.                     |                              |   | i                |               | 1 -                    |  | peracing company   |
|                 | ļ                      |                              |   |                  |               |                        | Company  |  |
|                 |                        |                              |   | ļ                |               |                        | 7-23-  | .93  |
|                 | 1                      |                              |   |                  |               | ļļr                    | Date   |  |
|                 | i                      |                              |   |                  |               |                        |  |  |
|                 | ;                      | 1                            |   | · i              |               |                        | CLID VIEV  | OR CERTIFICATION   |
|                 | ļ.                     | i_                           |   |                  |               |                        | SURVE  | OR CERTIFICATION   |
|                 |                        |                              | Marie de la companya |                  |               | 3                      | on this plat w<br>sctual surveys<br>supervison, an | y that the well location sho<br>cas plotted from field notes<br>made by me or under<br>d that the same is true of<br>best of my knowledge of |
|                 | Ì                      |                              | i<br>Vita ligita <u>je</u>  |                  |               |                        | Date Surveyed                                      |  |
|                 |                        |                              | · .   |                  |               |                        | Signature & Sc<br>Professional Su                  | al of<br>irveyor   |
|                 |                        |                              |   |                  |               |                        | Centificate No.                                    |  |
| 330 660         | 990 1320 16            | 50 1980 2310 2640            | 2000  | 1500             | 1000          | 500 0                  |  |  |