

State of New Mexico
Energy, Minerals & Natural Resources Department

Form 2-102

Revised February 1, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

District I
PO Box 1980, Hobbs, NM 88241-1980
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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | | | | |
|--|--|---|--|---|--|
| ¹ API Number 30-025-33124 | | ² Pool Code 52250 | | ³ Pool Name Rhodes Gas Pool - Yales SR | |
| ⁴ Property Code 17608 | | ⁵ Property Name Rhodes 'B' Federal | | | ⁶ Well Number # 2 |
| ⁷ OGRID No. 26485 | | ⁸ Operator Name Meridian Oil Inc. | | | ⁹ Elevation 2995' |

| | | | | | | | | | |
|--------------------------------|----------------------|------------------------|---------------------|----------|-------------------------------|----------------------------------|-------------------------------|-------------------------------|----------------------|
| ¹⁰ Surface Location | | | | | | | | | |
| UL or lot no. K | Section 26 | Township 26S | Range 37E | Lot. Idn | Feet from the 2310' | North/South Line South | Feet from the 1980' | East/West line West | County Lea |

| | | | | | | | | | |
|--|---------|----------|-------|----------|---------------|------------------|---------------|----------------|--------|
| 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 40 180 | | | | | | | | | |
| ¹³ Joint or Infill | | | | | | | | | |
| ¹⁴ Consolidation Code | | | | | | | | | |
| ¹⁵ Order No. | | | | | | | | | |

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. Signature Donna Williams Printed Name Regulatory Assistant Title 11/28/95 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 | | | |
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