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

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

<sup>1</sup> API Number

30-025-11874

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

Form C-10 Revised February 10, 195 Instructions on bac. Submit to Appropriate District Offic State Lease - 4 Copies Fee Lease - 3 Copies

<sup>3</sup> Pool Name

AMENDED	DEDODT
AMENDED	KEPUKI

## WELL LOCATION AND ACREAGE DEDICATION PLAT

JALMAT (TA, YTS, 7RVR) GAS

<sup>2</sup> Pool Code

* Property	/7		5 Property Name									6 Well Number	
143	R.O.	R.O. GREGORY									NO. 3		
7 OGRID No.			8 Operator Name									9 Elevation	
2648	DIAN OIL INC.												
						10	Surface I	ocatio	on				
M Section To		Township	ownship Range		Lot. Idn		Feet from the		North/South Line	Feet from the East/W		est line County	
		25\$		37E			330'		SOUTH	660'	660' WE		LEA
				11 Botte	om Ho	le Loc	ation If D	iffere	nt From Surface				
UL or lot no.	lot no. Section Township Range		Range	Lot. Idn		Feet from	the	North/South Line	Feet from the	East/West line		County	
							SAM	E	AS SURF.			300 11110	County
12 Dedicated Acres	s 13 Joint	or Infill	14Cc	onsolidation	n Code	15 Ord	er No.	·			<u>.                                    </u>	i	
120 NSP													
NO ALLOW	VABLE W	ILL BE	ASS	SIGNED	TO TH	IIS CO	OMPLET	ION (	JNTIL ALL INT	TERESTS HAV	F RFF	N CON	JSOI IDATED
		OR A	NO	NSTA	NDAR	D UN	IT HAS I	BEEN	APPROVED B	Y THE DIVISION	ON	i COI	OCLIDATED
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				- 1						Signature	LU		
				İ						DONNA WILL	JAMS	•	
									Printed Name				
										REGULATOR'	Y ASSI	STANT	
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										Date	<del>- '</del>	•	<del></del>
										18 SURVEY	OR CE	RTIFIC	ATION
•	Ī									I hereby certify that	it the we	ll location	aliana an this
*	El Paso	Tom F	odo	rol No	. 7					was plotted from me or under my	supervision.	of acti and th	tal surveys mad at the same is
•	LI Taşu	TOM F	eue	iai No	. /					and correct to the best of	f my belief.		
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		11 11	12	-						Date of Survey			
				•						Signature and Scal of Pr	rofessional S	urveyer:	
*	R.O. G1	regorn	Nο	3									
76		Legury	MO	. ,									
			2							Certificate Number			
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OFFICE