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DISTRICT I

State of New Mexico

E. .rgy, Minerals and Natural Resource. Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

P.O. Box 1980, Hobbs, NM 88240

WELL LOCATION AND ACREAGE DEDICATION PLAT

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

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## All Distances must be from the outer boundaries of the section

| Operator                                                                                                                                                                                                                                     |                 |                             | Lease    |               |              | Tell No.                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------|----------|---------------|--------------|---------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                              | ENRON OIL AND   | GAS COMPANY                 |          | HALLWOOD "12" | FEDERA       |                                                                                       |
| Unit Letter                                                                                                                                                                                                                                  | Section         | Township                    | Range    |               |              | County                                                                                |
| N                                                                                                                                                                                                                                            | 12              | 25 SOUTH                    |          | 33 EAST       | NMPM         | LEA                                                                                   |
| Actual Footage Loo                                                                                                                                                                                                                           | <u> </u>        | ITU                         | 198      | n             | 6            | the WEST line                                                                         |
| 660 ree<br>Ground Level Elev                                                                                                                                                                                                                 | t from the SOL  |                             | Pool     | <u> </u>      | feet from    | Dedicated Acreage:                                                                    |
| 3367. <u>8'</u>                                                                                                                                                                                                                              |                 | Spring                      | Red      | Hills         |              | 80 Acres                                                                              |
|                                                                                                                                                                                                                                              |                 | the subject well by colored |          |               | plat below.  |                                                                                       |
| 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royaity).                                                                                               |                 |                             |          |               |              |                                                                                       |
| 3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization,<br>unitization, force-pooling, etc.?                                                        |                 |                             |          |               |              |                                                                                       |
| Yes No If answer is "yes" type of consolidation                                                                                                                                                                                              |                 |                             |          |               |              |                                                                                       |
|                                                                                                                                                                                                                                              | لنسب            |                             |          |               | l. (Use reve | erse side of                                                                          |
| If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary.                                                                                                     |                 |                             |          |               |              |                                                                                       |
| No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division. |                 |                             |          |               |              |                                                                                       |
| otherwise) or t                                                                                                                                                                                                                              |                 | ru unit, chimitating such   |          |               |              | OPERATOR CERTIFICATION                                                                |
|                                                                                                                                                                                                                                              | 1               |                             |          | Ì             |              | I hereby certify the the information                                                  |
|                                                                                                                                                                                                                                              | 1               |                             |          |               |              | contained herein is true and complete to the                                          |
|                                                                                                                                                                                                                                              | 1               |                             |          | 1             |              | best of my knowledge and beilef.                                                      |
|                                                                                                                                                                                                                                              |                 |                             |          | Ì             |              | Bottor 4 10 alog                                                                      |
|                                                                                                                                                                                                                                              | l               |                             |          |               |              | Printed Name                                                                          |
|                                                                                                                                                                                                                                              | l               |                             |          |               |              | Betty Gildon                                                                          |
|                                                                                                                                                                                                                                              |                 |                             |          | +             |              | Position                                                                              |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              | Regulatory Analyst                                                                    |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              | Company                                                                               |
|                                                                                                                                                                                                                                              | 1               |                             |          |               |              | Enron Oil & Gas Company                                                               |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              | Date 5/2/94                                                                           |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              |                                                                                       |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              | SURVEYOR CERTIFICATION                                                                |
|                                                                                                                                                                                                                                              |                 |                             | <u> </u> |               |              | I hereby certify that the well location shown                                         |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              | on this plat was plotted from field notes of<br>actual surveys made by me or under my |
|                                                                                                                                                                                                                                              | 1               |                             |          |               |              | supervison, and that the same is true and                                             |
|                                                                                                                                                                                                                                              | ļ               |                             |          |               |              | correct to the best of my knowledge and belief.                                       |
|                                                                                                                                                                                                                                              |                 |                             |          | 1             |              | Date Surveyed                                                                         |
|                                                                                                                                                                                                                                              | İ               |                             |          | I             |              | APRIL 7, 1993<br>Signature & Seal of                                                  |
|                                                                                                                                                                                                                                              | ━- ╾- ╾- ┿<br>! |                             |          | - +           |              | Professional Surveyor                                                                 |
|                                                                                                                                                                                                                                              | - 1980'         | 3370.2*<br>                 |          |               |              | CARY L. JOANER                                                                        |
|                                                                                                                                                                                                                                              | 3374.4          |                             |          |               |              | Cervician No JOHNAN VERT 676                                                          |
|                                                                                                                                                                                                                                              |                 |                             |          |               |              |                                                                                       |
| 0 330 66                                                                                                                                                                                                                                     | 0 990 1320 1650 | 0 1980 2310 2640            | 2000 15  | 00 1000 500   | ) 0          | 941stm 2691                                                                           |

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