<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III

1000 Rio Brazos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

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NMOCD-REC'D: 03/18/2020 State of New Mexico Energy, Minerals & Natural Resources Department **OIL CONSERVATION DIVISION** 1220 South St. Francis Dr. Santa Fe, NM 87505

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office

X AMENDED REPORT

¹ API Number	² Pool Code	³ Pool Name		
30-015 28212	10500	Catclaw Draw, East (Delaware)		
⁴ Property Code	⁵ Property	⁶ Well Number		
003446	Cactus	5		
⁷ OGRID No.	⁸ Operator	⁹ Elevation		
329748	Tascosa Energy	3262 GL		

East/West line	County
West	Eddy
	West

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	¹³ Joint of	Infill ¹⁴ C	onsolidation C	ode ¹⁵ Orde	r 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.

			"OPERATOR CERTIFICATION
			I hereby certify that the information contained herein is true and complete
			to the best of my knowledge and belief, and that this organization either
990 FNL	1 - 1 - 1		owns a working interest or unleased mineral interest in the land including
990 FWL 3			the proposed bottom hole location or has a right to drill this well at this
			location pursuant to a contract with an owner of such a mineral or working
2			interest, or to a voluntary pooling agreement or a compulsory pooling
F			order heretofore entered by the division.
			Laren Clock 3.18.2020
			Signature Date
			Karen Cook Printed Name
			kaaak@tagaagaan aam
			kcook@tascosaep.com
			*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