NMOCD-REC'D: 03/18/2020

District I 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

<u>District III</u> 1000 Rio Brazos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 <u>District IV</u>

1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462 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

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-28497				² Pool Code 10500		³ Pool Name Catclaw Draw, East (Delaware)				
⁴ Property Code 003446				⁶ Well Number 11						
⁷ OGRID No. 329748			9	⁹ Elevation 3260 GL						
					Surface L	ocation				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
L	16	21S	26E		2310	South	990	West	Eddy	
			11 Bo	ttom Hol	e 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	s 13 Joint or	r Infill 14 C	onsolidation (Code 15 Ore	der 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.

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16			17 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
			owns a working interest or unleased mineral interest in the land including
			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
	=		interest, or to a voluntary pooling agreement or a compulsory pooling
			order heretofore entered by the division.
			Karen Cook 3-18-2020
			Signature Date
			Karen Cook Printed Name
			Printed Name
		A	kcook@tascosaep.com
			E-mail Address
990 FWL	}		18SURVEYOR CERTIFICATION
	2		I hereby certify that the well location shown on this
	3		plat was plotted from field notes of actual surveys
i i	}		
	3		made by me or under my supervision, and that the
	}		same is true and correct to the best of my belief.
! !	3		
munin)		Date of Survey
1			Signature and Seal of Professional Surveyor:
			organiae and bear of the bear of the bear of the
i			
یا			v
2310 FSL			
310			
53	, " , "		Certificate Number