District I Form C-102 State of New Mexico 1625 N French Dr , Hobbs, NN nergy, Minerals & Natural Resources Department Revised August 1, 2011 Phone (575) 393-6161 Fax (5 District II Submit one copy to appropriate 811 S First St , Artesia, NM 88210 CONSERVATION DIVISION Phone (575) 748-1283 Fax (5) District Office NMOCD ARTESIA District III 1220 South St. Francis Dr. Phone (505) 334-6178 Fax (505) 334 ☐ AMENDED REPORT Santa Fe, NM 87505 District IV 1220 S St Francis Dr , Santa Fe, NM 87505 Phone (505) 476-3460 Fax (505) 476-3462 WELL LOCATION AND ACREAGE DEDICATION PLAT ² Pool Code 3 Pool Name Dodd-Glorieta-Upper Yeso 97917 ⁶ Well Number

308195		Dodd Federal Unit						1 1	634	
⁷ OGRID №. 229137		⁸ Operator Name COG Operating LLC						3'Elevation		
[™] Surface Location										
UL or lot no.	Section 14	Township 17S	Range 29E	Lot Idn	Feet from the	North/South line SOWTh	Feet from the	East/West line WeSt	County Eddy	
" Bottom Hole Location If Different From Surface										
UL or lot no. 12 Dedicated Acres	14	Township 175 r Infill 14 C	Range 29E Consolidation C	Lot Idn		North/South line	Feet from the	East/West line WLH	Eddy	
40		R-10067-E								

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.

16		17 OPERATOR CERTIFICATION I hereby cerufy that the unformation 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
		Signature Signature Castillo Printed Name kcastillo@concho.com E-mail Address
		IsSURVEYOR 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
1252' 4 971 oth 5211	,	Signature and Seal of Professional Surveyor Certificate Number