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
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

Phone (505) 476-3460 Fax (505) 476-3462

State of New Mexico

nergy, Minerals & Natural Resources Departr

OIL CONSERVATION DIVISION 1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate

RECEIVED District Office
SEP 2 0 2012 AMENDED REPORT

NMOCD ARTESIA

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-39999			² Pool Code		³ Pool Name					
				30215		Hay Hollow; Bone Spring				
⁴ Property Code		⁵ Property Name							⁶ Well Number	
308169		SRO State Unit							18H	
⁷ OGRID №.				⁹ Elevation						
229137		COG Operating LLC							3061'	
					¹⁰ Surface	Location		<u> </u>		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
A	17	26S	28E		330	North	330	East	Eddy	
	ı		п Вс	ottom Ho	le Location I	f Different From	m Surface		· .·\	
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
P	20	26S	28E		394	South	588	East	Eddy	
Dedicated Acres	¹³ Joint o	r Infill	onsolidation	Code 15 Or	der No.					
320	ı									

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.

		(3)	17 CARRA LEGA CERTERIO LEGA ESCAS
16		<u></u>	¹⁷ OPERATOR CERTIFICATION
		Take Court Gain	I hereby certify that the information contained herem is true and complete
		SHL 330	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
			mterest, or to a voluntary pooling agreement or a compulsory pooling order
		* 7.*	heretofore entered by the dyssion
			8/31/12
			Signature Date
	Producing		Stormi Davis Regulatory Analyst
	Area		Stormi Davis Regulatory Analyst Printed Name
	8256-17381'		
		} 	- sdavis@concho.com
			E-mail Address
CEC 15			18 SURVEYOR CERTIFICATION
SEC 17			SURVETOR CERTIFICATION
		A.T	I hereby certify that the well location shown on this plat
SEC 20			
SEC 20		A A A A A A A A A A A A A A A A A A A	was plotted from field notes of actual surveys made by
SEC 20			was plotted from field notes of actual surveys made by
SEC 20			me or under my supervision, and that the same is true
,			was plotted from field notes of actual surveys made by
			me or under my supervision, and that the same is true
			was piotiea 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.
,			was piotied 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
, , , , , , , , , , , , , , , , , , ,			was piotiea 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.
, , , , , , , , , , , , , , , , , , ,			was piotied 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
,			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
,			was piotied 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
,			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
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			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 REFER TO ORIGINAL PLAT
, ,			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
,		BHL 538	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 REFER TO ORIGINAL PLAT
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