

HOBBS OCD

State of New Mexico

Form C-102

District I
1625 N. French Dr., Hobbs, NM 88240
Phone (505) 391-6101 Fax (505) 393-0729
District II
811 S. First St., Aztec, NM 88201
Phone (505) 738-1283 Fax (505) 848-9720
District III
1000 Rio Bravo Road, Aztec, NM 88201
Phone (505) 334-6178 Fax (505) 334-6176
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 476-3400 Fax (505) 476-3402

MAR 20 2012

Minerals & Natural Resources Department
OIL CONSERVATION DIVISION

Revised August 1, 2011
Submit one copy to appropriate
District Office

RECEIVED

1220 South St. Francis Dr
Santa Fe, NM 87505

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-31222		² Pool Code 96971		³ Pool Name MONUMENT, DRINKARD, NORTH (GAS)	
⁴ Property Code		⁵ Property Name MONUMENT '13' STATE			⁶ Well Number 18
⁷ OGRID No. 4323		⁸ Operator Name CHEVRON U.S.A. INC			⁹ Elevation 3727'

¹⁰ Surface Location

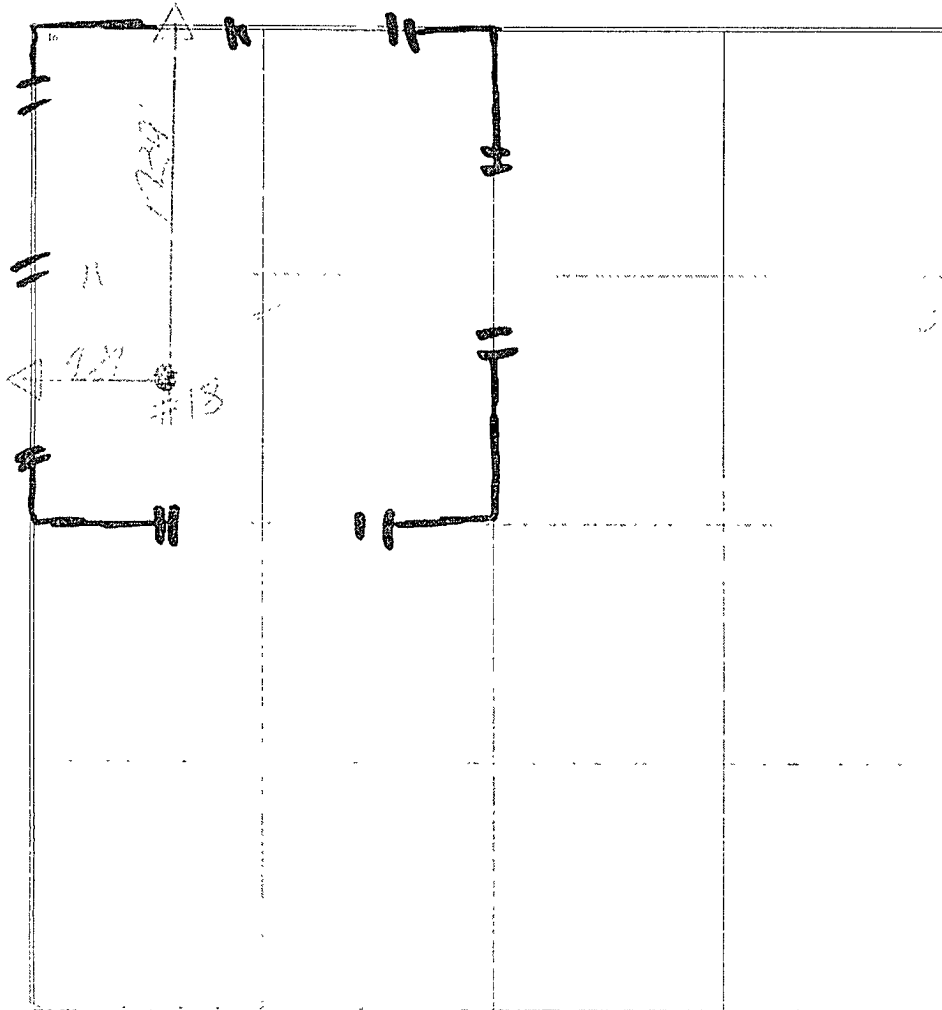
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	13	19-S	36-E		1739	NORTH	727	WEST	LJA

¹¹ Bottom Hole 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 160	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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.



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 information includes a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to hold it as well as my location of mineral lease contract with the owner of such interest or working interest, or a working interest in such lease, or a mineral interest in the land as to be recorded by the division.

[Signature] 03-20-2012
Signature Date

DENISE PENNINGTON REGULATOR SUPERVISOR
Printed Name

[Email Address]
E-mail Address

¹⁸ SURVEYOR CERTIFICATION
I hereby certify that the well location shown in this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge.

[Signature]
Signature and Title (Professional License)

MAR 20 2012