District I 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III 1000 Río Brazos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170

1220 S. St. Francis Dr., Santa Fe, NM 87505

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

District IV

State of New Mexico

Form C-102 Revised August 1,

Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION OPES OCSubmit one copy to appropriate

District Office

1220 South St. Francis Dr. Santa Fe, NM 87505

FEB 0 8 2016 RECEIVED

☐ AMENDED REPORT (As Drilled)

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code	³ Pool Name		
30-025-42789	96434	Red Hills; Bone Spring, North		
⁴ Property Code	⁵ Property	Name ⁶ Well Number		
39748	Tyrell	Fee 2H		
⁷ OGRID №.	8 Operator	Name Selevation		
229137	COG Operating LLC 3607' GR			

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
A	14	24S	33E		190	North	990	East	Lea
		·	11 Bo	ttom Hol	e Location It	f Different Fro	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	14	24S	33E		354	South	656	East	Lea

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		990'	17 OPERATOR CERTIFICATION
		SHL	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
		The state of the s	interest or unleased mineral interest in the land including the proposed bottom
		il i	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.
			1/18/16
			Signature Date
			Stormi Davis
			Printed Name
			sdavis@concho.com
			E-mail Address
\			
	Producing Area		18SURVEYOR CERTIFICATION
	9458-13725'		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.
<u> </u>			best of my beneg.
			Date of Survey
			Signature and Seal of Professional Surveyor:
		(1,2,1) , $(1,2)$	REFER TO ORIGINAL PLAT
		l i i i i i i i i i i i i i i i i i i i	REFER TO ORIGINAL FEAT
		BHL 656' 4	
1			Cariforn Number
		7.2	Certificate Number