District 1 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

Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION

State of New Mexico

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office

District III 1000 Rio Brazos Road, Aztec, NM 87410			OBBS O	12	1220 South St. Francis Dr.					Distri	ici Omicc		
Phone: (505) 476-3460 Fax: (505) 476-3462			B 2 5 2	014	Santa Fe, NM 87505			,	☐ AMENDED REPORT				
		V,	ELL LC	CATION	N AND ACI	REAGE DEDIC	CATION PLA	T		<u> </u>			
¹ API Number RECEIVE			KECEIVE	Pool Code	1								
30-025-41393			4332	43329 MALJAMAR; GRAYBURG/ SAN ANDF									
⁴ Property Code			⁵ Property Name								⁶ Well Number		
31422 MCA UNI			NIT	Γ							488		
⁷ OGRID No.			8 Operator Name								⁹ Elevation		
217817 ConocoPhi			Phillips Co	llips Company						3974			
					Surface	Location							
UL or lot no.	Section	Township	Range	Lot Idn	Feet from th	e North/South line	Feet from the	East/West line			County		
M	23	_17S	32E		70	SOUTH	510	WEST		LEA			
			"Во	ttom Hol	e Location l	f Different Fron	n Surface						
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	e North/South line	Feet from the	East/West line			County		
12 Dedicated Acres	s 13 Joint o	r Infill 14 C	Consolidation	Code 15 Or	der No.	- I				·			
No allowable division.	will be as	signed to th	is complet	ion until al	l interests have	e been consolidated	or a non-standa	rd unit ha	s been ar	oproved b	y the		

! ''			"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.
			Signature Del Of Date
			Ashley Bergen
			Printed Name
			ashley.bergen@cop.com_
	· ·		E-mail Address
,			
			 *SURVEYOR 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
			Signature and Scal of Professional Surveyor:
			·
1			
}			
1	/		
1			
510'			Certificate Number
7 10			

MW/OLD 3/14