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

<u>District III</u> 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

IHOBBS, Prinerals & Natural Resources Department
OIL CONSERVATION DIVISION
MAR 1 2 2011/220 South St. Francis Dr.
Santa Fe, NM 87505

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

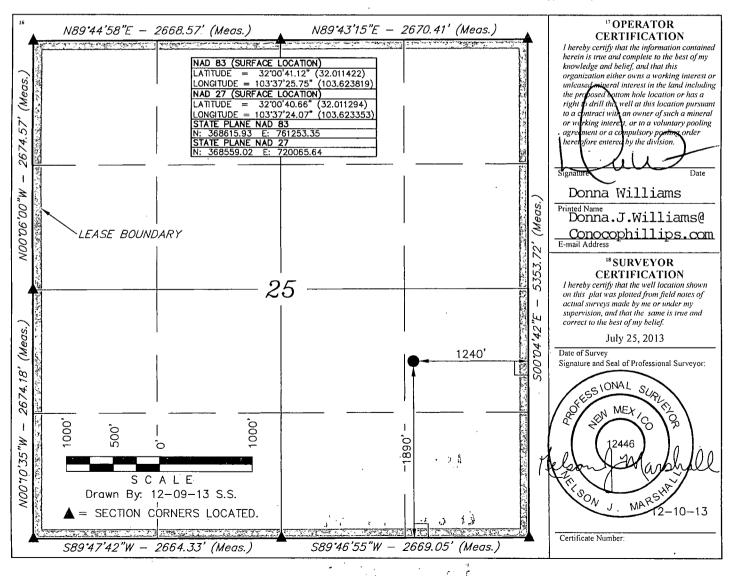
☐ AMENDED REPORT

RECEIVED

WELL LOCATION AND ACREAGE DEDICATION PLAT

30-025-41720 GPOLCO					/	3 Pool Name				
40.42	79	7112	<u> </u>	1800	5 Property N WAR HAMM	ame Sels ER 25 M	mic Monit	for wolfco	6 Vell Number #1	
7,6GRID N 217817	0.	* Operator Name ConocoPhillips Company							⁹ Elevation 3115'	
			20 24 25 0 2 .		¹⁰ Surface	Location	,	,	•	
UL or lot no. [Section 25	Township 26 S	Range 32 E	Lot Idn	Feet from the 1890	North/South line SOUTH	Feet from the 1240	East/West line EAST	County LEA	
			u	Bottom H	ole Location I	f 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	
N/A Mon	itor/s	ource w	11 ^{14 Conse}	olidation Code	15 Order No.				·	

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.



Operator Certification

CONOCOPHILLIPS COMPANY

CERTIFICATION:

I hereby certify that I, or persons under my direct supervision, have inspected the proposed drill site and access route proposed herein; that I am familiar with the conditions which currently exist; that I have full knowledge of State and Federal laws applicable to this operation; that the statements made in this APD package are, to the best of my knowledge, true and correct; and that the work associated with the operations proposed herein will be performed in conformity with this APD package and the terms and conditions under which it is approved. I also certify that I, or the company I represent, am responsible for the operations conducted under this application with bond coverage provided by Nationwide Bond ES0085. These statements are subject to the provisions of 18 U.S.C. 1001 for the filing of false statements.

Date: 8/27/13_

Donna Williams

Sr. Regulatory Advisor