811 S. First St., Artesia, NM 88210	đ	State of New Mexico Minerals & Natural Resources Department IL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office AMENDED REPORT (As Drilled)
1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462		ATION AND ACREAGE DEDICATION PLAT	(AS Dimeu)

¹ API Number ² Pool Code ³ Pool Name 30-025-41371 14865 **Cruz; Bone Spring** ⁴ Property Code ⁵ Property Name ⁶ Well Number 310145 **Brinninstool Unit 3H** OGRID No. ⁸ Operator Name ⁹ Elevation **COG Operating LLC** 229137 3695' GR ¹⁰ Surface Location UL or lot no. Township Range Lot Idn Feet from the North/South line Feet from the East/West line Section County 33E 0 20 23S 330 South 2260 East Lea ¹¹ Bottom Hole Location If Different From Surface UL or lot no. Lot Idn Feet from the North/South line Section Township Range Feet from the East/West line County 384 37<u>0</u> B 20 23S 33E North <u>2290</u> East Lea 12 Dedicated Acres ³ Joint or Infill ¹⁴ Consolidation Code 2291 15 Order No. 160

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.

	20			
16				¹⁷ OPERATOR CERTIFICATION Thereby certify that the information contained herein is true and complete
		BHL	2290'	to the best of my knowledge and belief, and that this organization either
	l i			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
	L L			interest, or to a voluntary pooling agreement or a compulsory pooling order
	i -			heretofore entered by the avision.
Producing Area	din I			Signature Date
11284-15307'				Stormi Davis
	1			Printed Name
		ÌÒ		sdavis@concho.com E-mail Address
		457		
	1			¹⁸ 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
	一个个			
				and correct to the best of my belief.
			······	Date of Survey
				Signature and Seal of Professional Surveyor:
				REFER TO ORIGINAL PLAT
		SHL	2260'	
	-	And the second	2260	Certificate Number

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State of New Mexico County of Lea

I, Michael K. Baber, certify that: I am employed by Terra Directional Services LLC; that I did on the day(s) of 11/17/13 through 11/27/13 conduct or supervise the taking of a MWD survey from a depth of 10566 feet to a depth 15405 feet; that the data is true, correct, complete and within the limitations of the tool as set forth by Terra Directional Services LLC; that I am authorized and qualified to make this report; that this survey was conducted at the request of Concho Operating LLC for the Brinninstool Unit #3H Well API 30-025-41371 in Lea County, New Mexico; and that I have reviewed this report and find that it conforms to the principles and procedures as set forth by Terra Directional Services LLC.

Michael K. Baber MWD Operations Coordinator

State of Texas County of

Before me, a notary public, on this day personally appeared <u>MI duel K. Baber</u>, known to me to be the person whose name is subscribed to the foregoing document and, being by me first duly sworn, declared that the statements therein contained are true and correct.



8610 N New Braunfels, Suite 405

San Antonio, Texas 78217

(210) 826-2022

Notary Public's Signature