## District | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 1

811 S. First St., Artesie, 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
<u>District IV</u>
1220 S. St. Francis Dr., Sante Fe, NM 87505

Phone: (505) 475-3460 Fax: (505) 476-3462

## State of New Mexico

## Energy, Minerals & Natural Resources Department

OIL 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

## WELL LOCATION AND ACREAGE DEDICATION PLAT API Number 30-025-41205 Maljamar; Grayburg, San Andres Pool Code 43329 Property Code <sup>5</sup> Property Name Well Number Ruby Federal 24 8 Operator Name ConocoPhillips Company OGRID No. Elevation 217817 3952' Surface Location UL or lot no. Lot Ida Section Township Range Feet from the North/South line Feet from the East/West line County K 18 2310' 17S 32E South 1650 West Lea

| " Bottom Hole Location If Different From Surface                         |         |          |       |         |               |                  |               |                |        |
|--|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| UL or lot no.  | Section | Township | Range | Loi Idn | Feet from the | North/South line | Feet from the | East/West line | County |
| 12 Dedicated Acres 13 Joint or Infill 14 Consolidation Code 15 Order No. |         |          |       |         |               |                  |               |                |        |
| 40 DHC-41681   |         |          |       |         |               |                  |               |                |        |

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                                    | Lease Boundary | "OPERATOR CERTIFICATION   |
|---------------------------------------|----------------|---|
|                                       | 1              | 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.                                   |
| Lease                                 |                | Superbi Maunder 5/30/14 Signature Date                                      |
|                                       |                | Susan B. Maunder  |
| bounda                                |                | Printed Name<br>Susan.B.Maunder@conocophillips.com                          |
| 26                                    | ·              | E-mail Address  |
|                                       |                |   |
|                                       |                | *SURVEYOR CERTIFICATION   |
| 1                                     |                | I hereby certify that the well location shown on this                       |
| 1650                                  |                | plat was plotted from field notes of actual surveys                         |
| 1 4 1                                 |                | 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 Seal of Professional Surveyor.                                |
| 03/0                                  | į.             | Signature and Some of Professional Out voyor.                               |
| 100                                   |                |   |
|                                       |                |   |
|                                       |                |   |
|                                       |                |   |
|                                       |                | Certificate Number  |
|                                       | Lease Boundary |   |