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 District III 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

Form C-102 Revised August 1, 2011

Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION

DEC 0 9 2014 Prior 1 0 0 0

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

RECEIVED	AMENDED REPORT
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WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number				² Pool Code ³ Pool Name				ne		
30-025-22163				24180		EUNICE SAN ANDRES SOUTHWEST				
1 Property Code				⁵ Property Name					6 Well Number	
31240	312404				COLE STATE			10		
⁷ OGRID	OGRID No.			⁸ Operator Name			⁹ Elevation			
258350				VANGUARD PERMIAN LLC				3394 GL		
					¹⁰ Surface I	Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
Е	16	22S	37E		2310	NORTH	990	WEST	LEA	
			" Bo	ttom Hol	e Location If	Different Fron	1 Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West li	ne County	
12 Dedicated Acres	¹³ Joint 01	r Infill 14 C	onsolidation	Code 15 Or	der No.					
40										

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				17 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
1				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
	<u>'</u>			interest, or to a voluntary pooling agreement or a compulsory pooling
				order heretofore enterelf by the division.
				Colleen Dernary 12-4-14 Signature Date
				COLCENICEDMANY
				COLEEN GERMANY Printed Name
				Thines raine
				cgermany@oilreportsinc.com
<u> </u>	ļ			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 Seal of Professional Surveyor:
				Contifer to Number
				Certificate Number
<u> </u>		<u> </u>	 l	/I

