

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
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
(As Drilled)

JAN 20 2015

RECEIVED

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-41574	² Pool Code 37570	³ Pool Name Lea; Bone Spring
⁴ Property Code 38664	⁵ Property Name Tusk Federal	
⁷ OGRID No. 229137	⁸ Operator Name COG Operating LLC	
		⁶ Well Number 5H
		⁹ Elevation 3735' GR

¹⁰ Surface Location

UL or lot no. P	Section 25	Township 19S	Range 34E	Lot Idn	Feet from the 190	North/South line South	Feet from the 330	East/West line East	County Lea
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no. A	Section 25	Township 19S	Range 34E	Lot Idn	Feet from the 352' 345'	North/South line North	Feet from the 404' 446'	East/West line East	County Lea
¹² Dedicated Acres 160	¹³ Joint or Infill	¹⁴ Consolidation 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.

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 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: <i>Stormi Davis</i> Date: 1/15/15 Printed Name: Stormi Davis E-mail Address: sdavis@concho.com	
				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 and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor:	
				REFER TO ORIGINAL PLAT Certificate Number	

JAN 29 2015