District 1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
<u>District II</u>
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
<u>District III</u>

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

HOBBS OCD

Form C-102 Revised August 1,

Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION SE 1220 South St. Francis Dr.

SEP 2 5 205 Submit one copy to appropriate
District Office

Santa Fe, NM 87505

RECEIVED ___ AMENDED REPORT

(As Drilled)

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number				² Pool Code 5535		³ Pool Name Berry; Bone Spring, North				
30-025-42036		}								
⁴ Property Code		⁵ Property Name							⁶ Well Number	
313861		Stratosphere 36 State Com							5H	
OGRID No.		8 Operator Name							⁹ Elevation	
229137				COG Operating LLC					3748' GR	
					¹⁰ Surface	Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
C	36	20S	34E		190	North	2200	West	Lea	
			11 Bo	ttom Hol	le Location I	f Different Fro	m Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
N	36	20S	34E		338	South	2019	West	Lea	

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	<u> </u>	17 OPERATOR CERTIFICATION
2200'		I hereby certify that the information contained herein is true and complete to the
	SHL	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.
		9/21/15
		Signature Date
		Stampi Davis
		Stormi Davis Printed Name
		sdavis@concho.com
		E-mail Address
	Control of the second of the s	POLIDATIVO CEDTICIO ATIONI
		18SURVEYOR CERTIFICATION
	Producing Area	I hereby certify that the well location shown on this plat was
	11432-15825'	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.
		cost of my benigh
		Date of Survey
		Signature and Seal of Professional Surveyor:
	Complete of the state of the st	·
	The state of the s	REFER TO ORIGINAL PLAT
		REFER TO ORIGINAL TENT
	BHL	
2019'	20 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Certificate Number
		Centificate Number