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District II
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District III
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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

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-38948		² Pool Code 30216		³ Pool Name Hay Hollow; Bone Spring, North	
⁴ Property Code 38579		⁵ Property Name Crossman 25 State Com			⁶ Well Number 1H
⁷ OGRID No. 229137		⁸ Operator Name COG Operating LLC			⁹ Elevation 2997' GR

¹⁰ Surface Location

UL or lot no. A	Section 25	Township 25S	Range 27E	Lot Idn	Feet from the 300	North/South line North	Feet from the 330	East/West line East	County Eddy
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no. P	Section 25	Township 25S	Range 27E	Lot Idn	Feet from the 362	North/South line South	Feet from the 385	East/West line East	County Eddy
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				<p>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.</p> <p><i>Stormi Davis</i> 11/4/11 Signature Date</p> <p>Stormi Davis Printed Name</p> <p>sdavis@concho.com E-mail Address</p>
				<p>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</p>
				<p>Date of Survey Signature and Seal of Professional Surveyor.</p>
				<p>REFER TO ORIGINAL PLAT</p> <p>Certificate Number</p>