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		Submit one copy to appropri	Submit one copy to any	Submit one copy to appropria	Submit one copy to appro	Istret II	1, 1, 1

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Property 0		<sup>5</sup> Property Name Dodd Federal Unit							6 Well Number 594	
<sup>7</sup> OGRID No. 229137		<sup>8</sup> Operator Name COG Operating LLC						Elevation 9		
					<sup>10</sup> Surface I	Location				
UL or lot no.	Section 15	Township 17S	Range 29E	Lot Ida	Feet from the 330	North/South line	Feet from the 2210	East/West line	County Eddy	
			" Bot	tom Hol	e Location If	Different Fron	n Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
<sup>12</sup> Dedicated Acres	s 3 Joint o	r Infill 14 (	Consolidation C	Code 15 Or	der No R-1(	0067-E				

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			ROBERATOR CERTIFICATION
	200,	2210'	17 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is true and complete
	29-	<i>D</i> =10	
	<u>}</u>		to the best of my knowledge and belief, and that this organization either
			owns a working interest or unleased nuneral 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
			6/08/12
			Signature Date
			Kanicia Castillo
			Printed Name .
			kcastillo@concho.com
			E-mail Address
·			
			18SURVEYOR CERTIFICATION
	İ		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
			. ,
			D. 60
	<u> </u>		Date of Survey
			Signature and Seal of Professional Surveyor
,			
·			
			C. C. N.
			Certificate Number
N4_	1		JL