

NM OIL CONSERVATION
ARTESIA DISTRICT

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6141 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 Rd., 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, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office
 AMENDED REPORT

OCT 28 2014
RECEIVED

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-42526	Pool Code 54600	Pool Name Leo South; Bone Spring
Property Code 313538	Property Name URSA 27 B2IL FED COM	Well Number 1H
OGRID No. 14744	Operator Name MEWBOURNE OIL COMPANY	Elevation 3408.2

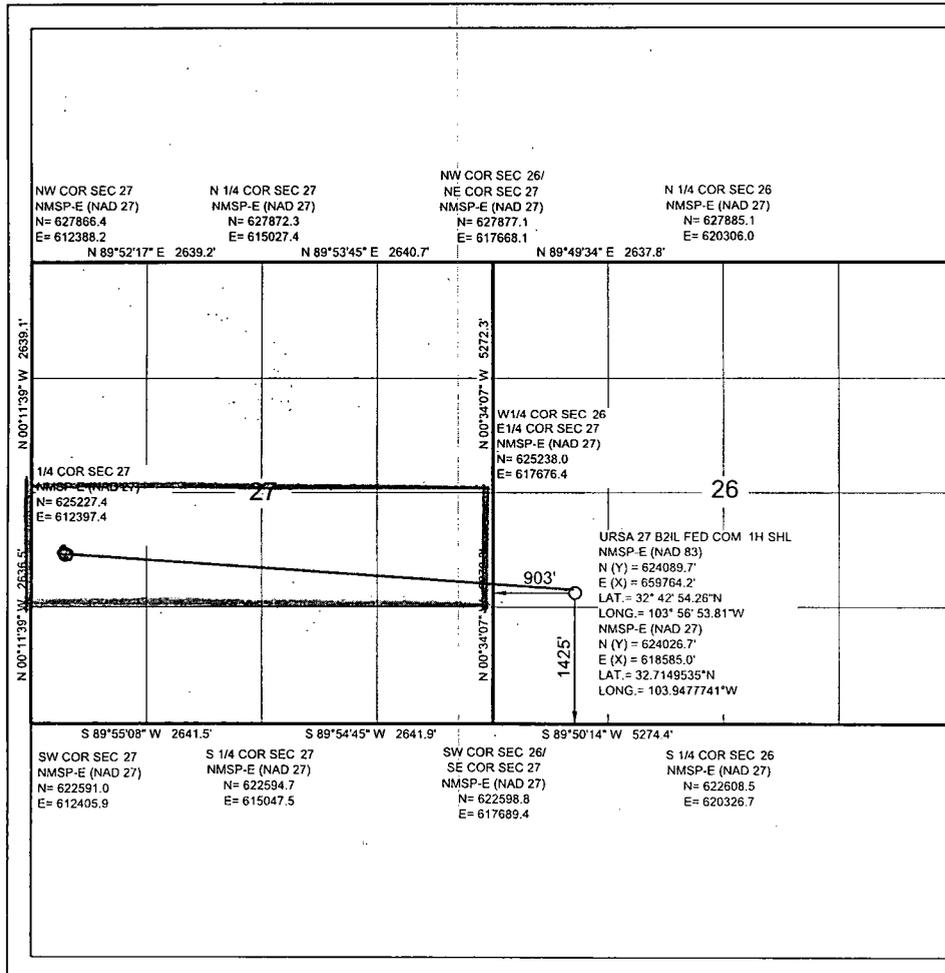
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	26	18S	30E		1425	SOUTH	903	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	27	18S	30E		2073'	South	336'	West	Eddy
Dedicated Acres 160	Joint or Infill	Consolidated Code	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.



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 voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: *Jackie Lathan* Date: _____
Print Name: **Jackie Lathan**
E-mail Address: _____

SURVEYORS 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.

FEBRUARY 28, 2014
Date of Survey

Signature and Seal of Professional Surveyor
James E. Tompkins

JAMES E. TOMPKINS
NEW MEXICO
REGISTERED PROFESSIONAL LAND SURVEYOR
14729

Job No.: WTC 49693
JAMES E. TOMPKINS 14729
Certificate Number