APPROVED BY: Conditions of Approval (if any): District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Río Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico Energy, Minerals & Natural OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

Form C-102 Revised October 12, 2005

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION DLAT

		44.7		TION AL	ID ACKEA	GE DEDICA.	HONTEAT			
¹ API Number			2]	² Pool Code ³ Pool Name					-	
30-025-36811] :	22900 Eunice; Blinebry-Tubb-Drinkard, North						
⁴ Property Code			⁵ Property Name					⁶ Well Number		
23510					07					
⁷ OGRID No.			⁸ Operator Name						9 Elevation	
873			Apache Corporation						3470 GR	
				10	Surface Loc	ation				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	Co	ounty
G	4	21.0S	37E		3480	S	1650	E	Lea	
			11 Bottor	n Hole Lo	cation If Di	fferent From S	Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	Co	ounty
Dedicated Acres 40	13 Joint	or Infili	Consolidation Cod	le 15 Order 1	No.			-		
						nsolidated or a no	n-standard unit l	nas been appro	ved by the div	

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 locat
				1
		i		Signature Date Signature Date
		; 		Signature
		//		Sophie Mackay
				Printed Name
	THE PARTY OF THE P	/.	•	
	1			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:
			ANTON MICHAEL MANAGEMENT AND ANTON MANAGEMENT AND ANTON MANAGEMENT AND	
				Certificate Number