<u>District I</u> 1625 N French Dr., Hobbs, NM 88240 Phone (575) 393-6161 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 Road, Aztec, NM 87410 Phone (505) 334-6178 Fax (505) 334-6170 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

JUN 01.2012

Revised August 1, 2011 Sabmit one copy to appropriate District Office

Form C-102

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

30-015- 39568				<sup>2</sup> Pool Code 97918		Burch Keely-Glorieta-			Yeso	
<sup>4</sup> Property Code				<b>I</b>	Well Number					
308086				7	565					
<sup>7</sup> OGRID №. 229137			*Operator Name COG Operating LLC						<sup>9</sup> Elevation	
<sup>10</sup> Surface Location										
UL or lot no.	Section	Township	30E	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	Eddy	
"Bottom Hole Location If Different From Surface										
UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	e County	
		<u> </u>		-					,	
Dedicated Act	res 13 Joint o	or Infill 14 Co	onsolidation (	Code 15 Or	rder No. R - 1 (	0067-E		٠.		

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			1650'	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					
			990'	Signature  Signature  Kanicia Castillo  Printed Name  kcastillo@concho.com  E-mail Address					
				INSURVEYOR 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  Certificate Number					