State of New Mexico 1625 N. French Dr., Hobbs, NM 88240 Revised August 1, 2011 Phone: (575) 393-6161 Fax: (575) 393-0720 Energy, Minerals & Natural Resources Department District II Submit one copy to appropriate 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION Phone: (575) 748-1283 Fax: (575) 748-9720 District Office 1220 South St. Francis Dr. 1000 Rio Brazos Road, Aztec, NM 87410 OCT 1 1 2013 Phone: (505) 334-6178 Fax: (505) 334-6170 ☐ AMENDED REPORT Santa Fe, NM 87505 District IV -1220 S. St. Francis Dr., Santa Fe, NM 87505 NMOCD ARTESIA Phone: (505) 476-3460 Fax: (505) 476-3462 WELL LOCATION AND ACREAGE DEDICATION PLAT ¹ API Number ² Pool Code Spring 30-015-41305 Sar Bone 53600 orenzo Property Name Well Number **Property Code** SAN LORENZO 9 MD FEE 1 H Operator Name Elevation OGRID No. MEWBOURNE OIL COMPANY 3000 ¹⁰ Surface Location UL or lot no. Lot Idn Feet from the North/South line Feet from the East/West line Section Township Range County 28-E M 9 25-S 150 SOUTH 380 WEST **EDDY** ¹¹ Bottom Hole Location If Different From Surface UL or lot no. Section Township Range Lot Idn Feet from the North/South line East/West line County North a 25.5 28. E E490 331 426 lclest ¹² Dedicated Acres ³ Joint or Infill Consolidation Code ¹⁵ Order No. 160 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. 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 End of kelell bore 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 E-mail Address *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. 3/18/13 Date of Survey Signature and Seal of Profi 19680 ESS/ONAL 19680 Certificate Number

District I

Form C-102