

District I  
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  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

AUG 23 2018  AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number <b>30-015-44358</b>		<sup>2</sup> Pool Code <b>98199</b>		<sup>3</sup> Pool Name <b>PARKWAY; BONE SPRING, WEST</b>	
<sup>4</sup> Property Code <b>317515</b>		<sup>5</sup> Property Name <b>ONYX PWU 29-28</b>			<sup>6</sup> Well Number <b>62H</b>
<sup>7</sup> OGRID No. <b>6137</b>		<sup>8</sup> Operator Name <b>DEVON ENERGY PRODUCTION COMPANY, L.P.</b>			<sup>9</sup> Elevation <b>3307.4</b>

<sup>10</sup> Surface Location

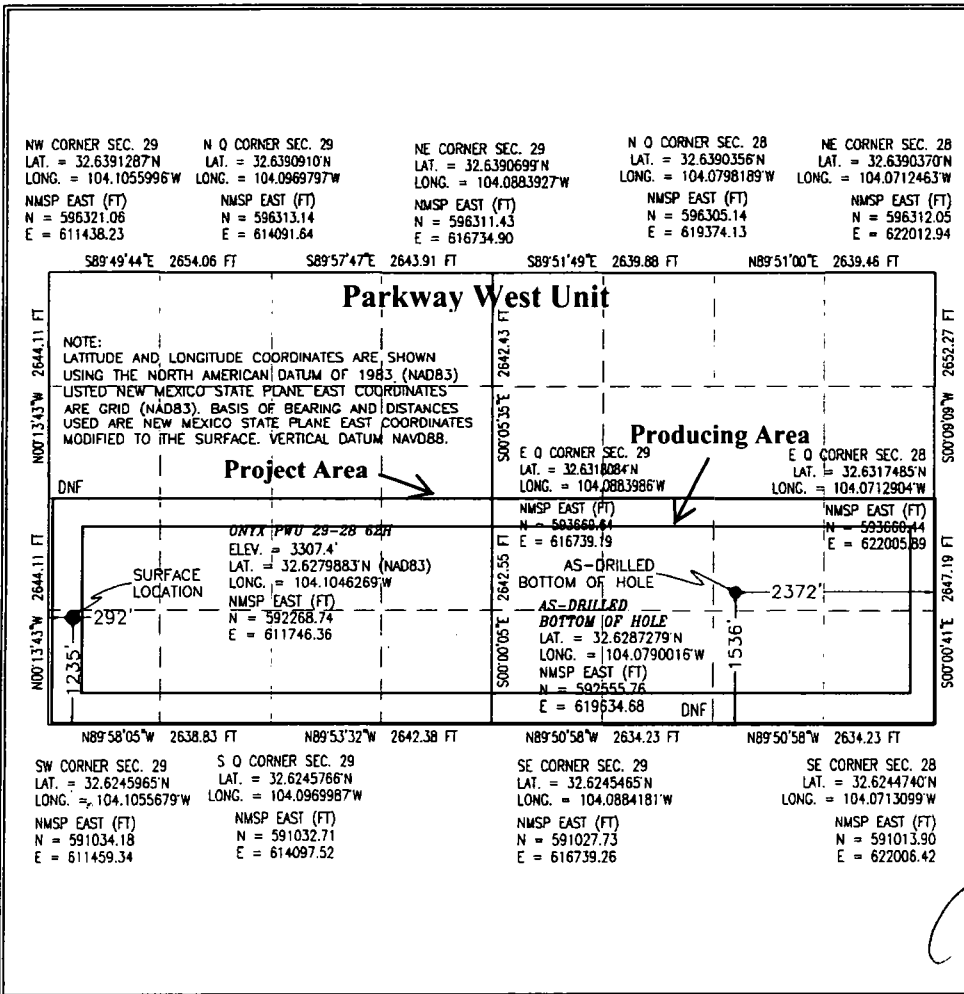
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	29	19 S	29 E		1235	SOUTH	292	WEST	EDDY

<sup>11</sup> 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
J	28	19 S	29 E		1536	SOUTH	2372	EAST	EDDY

<sup>12</sup> Dedicated Acres <b>640</b>		<sup>13</sup> Joint or Infill		<sup>14</sup> Consolidation Code		<sup>15</sup> Order No. <b>R-14188</b>			
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No allowance will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



**<sup>17</sup> 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.

Signature 08/22/2018  
 Date

Printed Name **Erin workman**  
 E-mail Address **Erin.workman@dvn.com**

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**<sup>18</sup> 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.

AUGUST 21 2018  
 Date of Survey

Signature and Seal of Professional Surveyor  
 Certificate Number **FILIMON F. JARAMILLO, PLS 12797**  
 SURVEY NO. 5215

RW 8-23-18.