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JUN 08 2019

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

State of New Mexico
Energy, Minerals & Natural Resources Department
DISTRICT II-ARTESIA O.C.D.
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-44977	Pool Code 98220	Pool Name Purple Sage Wolfcamp
Property Code 318942	Property Name SUNRISE MDP1 "8-5" FEDERAL COM	Well Number 172H
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 3534.4'

Surface Location

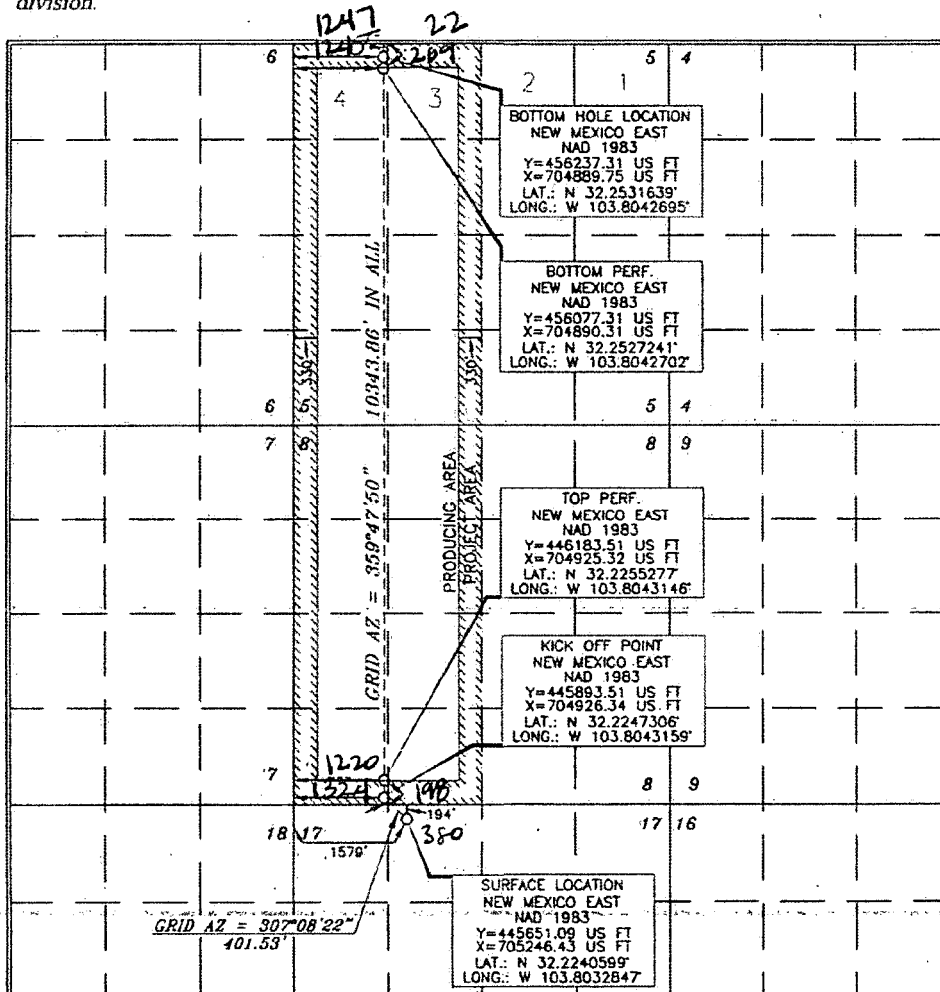
UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
C	17	24 SOUTH	31 EAST, N.M.P.M.		194'	NORTH	1579'	WEST	EDDY

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	County
4	5	24 SOUTH	31 EAST, N.M.P.M.		22	NORTH	1247	WEST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
640			NSL order: 7F12

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 undivided 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 hereafter entered by the division.

Signature: Sarah Chapman Date: 5/28/19

Printed Name: Sarah Chapman
E-mail Address: sarah-chapman@oxy.com

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from the original 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: NOVEMBER 6 2017

Signature and Title of Professional Surveyor: [Signature]

Certificate Number: 15079

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