

DISTRICT I
P.O. Box 1880, Hobbs, NM 88241-1880

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised February 10, 1994
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

DISTRICT II
P.O. Drawer ED, Artesia, NM 88211-0719

DISTRICT III
1000 Rio Brazos Rd., Artec, NM 87410

DISTRICT IV
P.O. Box 2088, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | |
|----------------------------|----------------------------------|-------------------------------------|
| API Number 30-015-30063 | Pool Code 96149 | Pool Name LIVINGSTON RIDGE (DEL) |
| Property Code 20860 | Property Name BARCLAY FEDERAL | Well Number 11 |
| OGEID No. 000990 | Operator Name ARCO PERMIAN | Elevation 3495 |

Surface Location

| | | | | | | | | | |
|--------------------|---------------|------------------|---------------|---------|----------------------|---------------------------|----------------------|------------------------|----------------|
| UL or lot No. A | Section 12 | Township 23 S | Range 31 E | Lot Idn | Feet from the 660 | North/South line NORTH | Feet from the 660 | East/West line EAST | County EDDY |
|--------------------|---------------|------------------|---------------|---------|----------------------|---------------------------|----------------------|------------------------|----------------|

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 |
| | | | | | | | | | |

| | | | |
|-----------------------|-----------------|--------------------|-----------|
| Dedicated Acres 40 | Joint or Infill | Consolidation Code | Order No. |
|-----------------------|-----------------|--------------------|-----------|

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>I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.</i> Signature: <u>Laurie Cherry</u> Printed Name: <u>LAURIE CHERY</u> Title: <u>REG/COMP. ASST.</u> Date: <u>12-10-99</u> | |
| | SURVEYOR CERTIFICATION <i>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.</i> JULY 11, 1997 Date Surveyed: _____ JLP Signature: _____ Seal of Professional Surveyor Professional Surveyor: <u>Ronald E. Eidson</u> 7-14-97 W.D. Num. 97-1158 Certificate No. <u>JOHN W. WEST, 676</u> <u>RONALD E. EIDSON, 3239</u> <u>RONALD E. EIDSON, 12641</u> | |
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