District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Azzec, NM 87410 District IV

PO Box 2088, Santa Fe, NM 87504-2088

API Number

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 Form C-102
AUG O 5Revised February 10, 1994
Instructions on back
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<sup>3</sup> Pool Name

\_\_\_ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

1 Pool Code

| 30-015-   |                        | 19779 46555 Millman, QN-GR-SA, East |              |              |        |  |                                       |   | East  |               |               |           |  |
|---|------------------------|-------------------------------------|--------------|--------------|--------|--|---------------------------------------|---|---|---------------|---------------|-----------|--|
| Property Code   |                        | Property Name                       |              |              |        |  |                                       |   |   | • Well Number |               |           |  |
|   |                        | LUCKY DOG                           |              |              |        |  |                                       |   |   |               | 11            |           |  |
| OGRID No.   |                        | Operator Name                       |              |              |        |  |                                       |   |   |               | , Ectation    |           |  |
| 020451  |                        | SDX RESOURCES, INC.                 |              |              |        |  |                                       |   |   | 3480.         |               |           |  |
|   | 1º Surface Location    |                                     |              |              |        |  |                                       |   |   |               |               |           |  |
| L'L or lot so. Section  |                        | Township                            | Range        | ge Lot ida   |        | from the                               | North/South line                      | Feet from the   |   | East/West     | ine           | County    |  |
| G   | 16                     | 19-S                                | 28-E         |              | 1980   |  | NORTH                                 |   | 1750  | EAST          |               | EDDY      |  |
|   | 1.0                    | 1.50                                | 1            | tom Hol      | e Lo   | cation                                 | If Different Fro                      | om  | Surface   | · · · · ·     |               |           |  |
| Lil. or lot no. Section   |                        | Township Range                      |              | Lot Ida      |        | from the                               |                                       |   | est from the East West  |               | lioe .        | County    |  |
| UL or lot no.   | 30000                  |                                     |              |              |        |  |                                       |   |   |               |               |           |  |
| 12 Dedicated Acr  | es <sup>13</sup> Joint | or Infill   14 (                    | Consolidatio | a Code   4 C | rder N | •••••••••••••••••••••••••••••••••••••• |                                       | ·   |   | <u> </u>      |               |           |  |
| 40  |                        | ŀ                                   |              |              |        |  |                                       |   |   |               |               |           |  |
| 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  |                        |                                     |              |              |        |  |                                       | 17 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief |   |               |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   |   |               |               |           |  |
|   | ļ                      |                                     |              |              |        |  |                                       |   |   | ,             |               |           |  |
|   |                        |                                     |              |              | `,     |  |                                       |   |   |               |               | ,         |  |
|   |                        |                                     |              |              | 086    |  |                                       |   |   | ,             | $\sim$        | /         |  |
|   |                        |                                     |              |              | 6/     |  |                                       |   | Janise Courtney   |               |               |           |  |
|   | i                      |                                     |              |              |        |  |                                       | - 1   | Signame   |               |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   | Printed Nam   | e Court       | tney          |           |  |
|   |                        |                                     |              |              | إ      |  |                                       |   | Regulatory Tech   |               |               |           |  |
|   |                        |                                     |              |              |        |  | 1750'                                 |   | Title   |               |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   | 3/6/97<br>Dete  |               |               |           |  |
|   |                        |                                     |              |              |        |  |                                       | "SURVEYOR CERTIFICATION   |   |               |               |           |  |
|   |                        |                                     | -            |              |        |  |                                       |   |   |               |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   | I hereby cerufy that the well location shown on this plat<br>was ploated 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.                         |               |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   | _   |               | •             | į         |  |
|   | I                      |                                     |              |              |        |  |                                       |   |   | 12 (R, R10)   | $\overline{}$ |           |  |
|   |                        |                                     |              |              |        |  | · · · · · · · · · · · · · · · · · · · | _   | Signaturo   | MEX           | Digital Su    | ndeyer:   |  |
|   |                        |                                     |              |              |        |  |                                       |   | , ,   | / \           | · 1           | 1 8       |  |
|   |                        |                                     |              |              |        |  |                                       |   |   | 5412 E        |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   | 15/2/5  |               | 8 / 3         | <i>[]</i> |  |
|   |                        |                                     |              | 1            |        |  |                                       |   | REGISTATION   | NO SURVENC    |               |           |  |
|   |                        |                                     |              |              |        |  |                                       |   | Wan   | Portestor     |               | Ton I     |  |
|   | 1                      |                                     |              |              |        |  |                                       | <u>ال_</u>  | Certificate No<br>NM PF   | LAPS NO       | 54.1          | 2 "       |  |