

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
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

HOBBS OCD
MAR 06 2017
RECEIVED

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-43361		² Pool Code 83600		³ Pool Name Red Hills; Wolfcamp (Gas)					
⁴ Property Code 316517		⁵ Property Name SALADO DRAW 10 WODM FEE COM				⁶ Well Number 2H			
⁷ GRID NO. 14744		⁸ Operator Name MEWBOURNE OIL COMPANY				⁹ Elevation 3330'			
¹⁰ Surface Location									
UL or lot no. D	Section 10	Township 26S	Range 33E	Lot Idn	Feet from the 310	North/South line NORTH	Feet From the 330	East/West line WEST	County LEA
¹¹ Bottom Hole Location If Different From Surface									
UL or lot no. M	Section 10	Township 26S	Range 33E	Lot Idn	Feet from the 330	North/South line SOUTH	Feet from the 330	East/West line WEST	County LEA
¹² Dedicated Acres 640		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

No allowable will be assigned to this completion until all interest 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 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: Jackie Lathan Date: 2/28/17
Printed Name: Jackie Lathan
E-mail Address: _____

18 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.

Date of Survey: 10/24/2014
Signature and Seal of Professional Surveyor: Robert M. Howett
Certificate Number: 19680

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Signature: Jackie Lathan Date: 2/28/17
Printed Name: Jackie Lathan
E-mail Address: _____

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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.

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