

**STATE OF NEW MEXICO  
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES  
OIL CONSERVATION DIVISION**

**APPLICATIONS OF NOVO OIL & GAS, LLC  
FOR A NON-STANDARD SPACING AND PRORATION UNIT  
AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

Township 23 South, Range 29 East, Eddy County, New Mexico

- Case 16281    BONE SPRING – N/2N/2 Section 6 and Lots 2 – 4 Section 5  
Rana Salada Fed Com 1 5 23S 29E 2B #1H
- Case 16282    BONE SPRING – S/2S/2 Section 4 and Section 5  
Rana Salada Fed Com 6 4 23S 29E 3B #1H
- Case 16283    BONE SPRING – N/2S/2 Section 4 and Section 5  
Rana Salada Fed Com 6 4 23S 29E 3B #2H
- Case 16285    WOLFCAMP – N/2 Sections 5 and Section 6  
Rana Salada Fed Com 1 5 23S 29E WB #1H  
Rana Salada Fed Com 1 5 23S 29E WXY #1H
- Case 16286    WOLFCAMP – S/2 Sections 4 and 5  
Rana Salada Fed Com 6 4 23S 29E WB #1H  
Rana Salada Fed Com 6 4 23S 29E WXY #1H
- Case 16284    AMENDED - BONE SPRING – E/2E/2 Section 5 and will be re-noticed for  
August 23rd

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  
☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                  |                                                                       |                                  |
|----------------------------------|-----------------------------------------------------------------------|----------------------------------|
| <sup>1</sup> API Number          | <sup>2</sup> Pool Code                                                | <sup>3</sup> Pool Name           |
| <sup>4</sup> Property Code       | <sup>5</sup> Property Name<br>RANA SALADA FED COM 1 5 23S 29E WXY     | <sup>6</sup> Well Number<br>1H   |
| <sup>7</sup> OGRID No.<br>372920 | <sup>8</sup> Operator Name<br>NOVO OIL AND GAS NORTHERN DELAWARE, LLC | <sup>9</sup> Elevation<br>3090.1 |

\* Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| 1             | 1       | 23 S     | 28 E  |         | 1127          | NORTH            | 365           | EAST           | 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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|-----------------|--------|
| 1             | 5       | 23 S     | 29 E  |         | 330           | NORTH            | 330           | EAST            | EDDY   |

|                               |                               |                                  |                         |
|-------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> 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.

**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 \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

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.

MAY 3, 2018

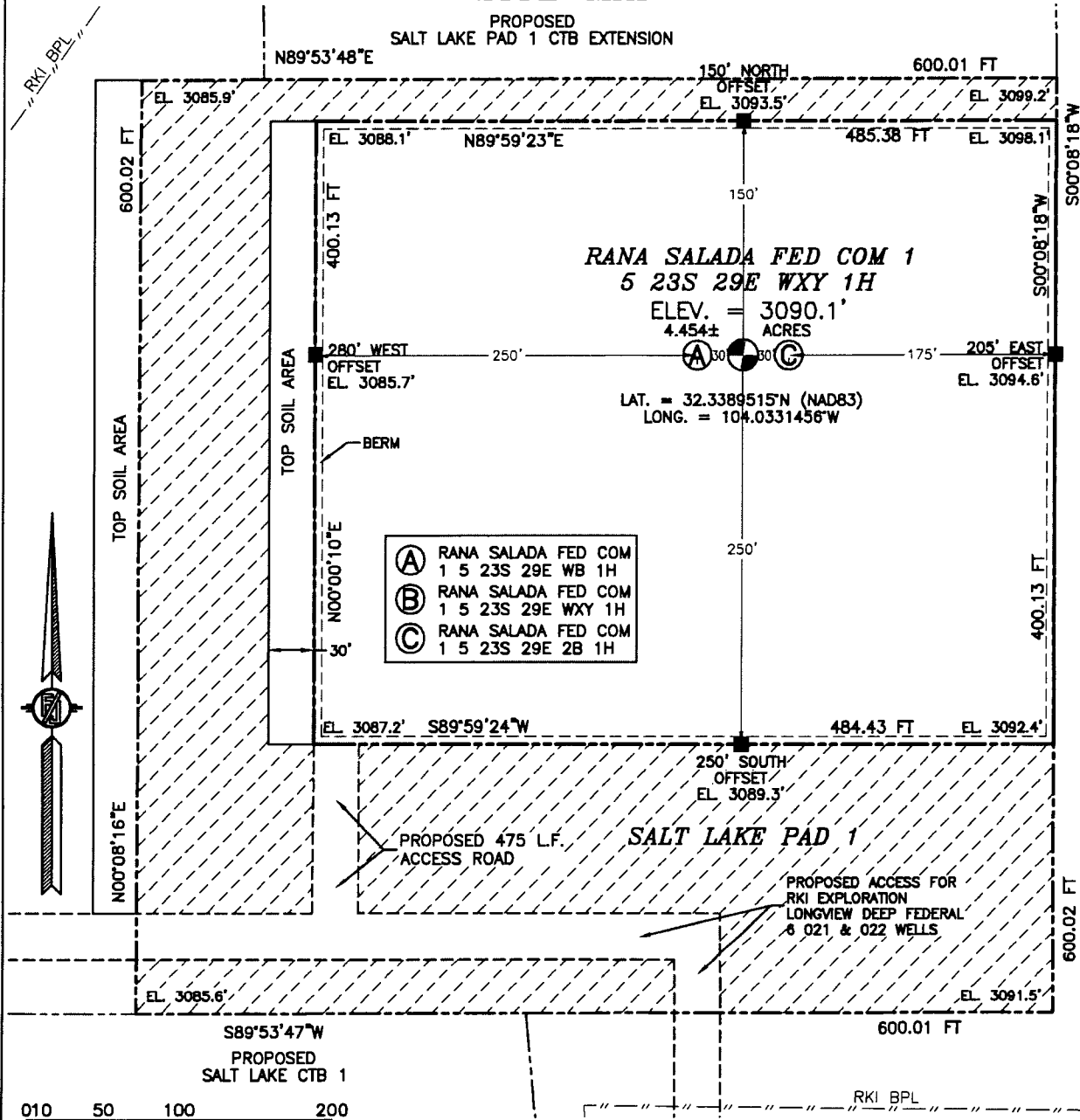
Date of Survey \_\_\_\_\_

Signature and Seal of Professional Surveyor \_\_\_\_\_

Certificate Number FILIMON F. JARAMILLO, PLS 12797

SURVEY NO. 6143

**SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
SITE MAP**



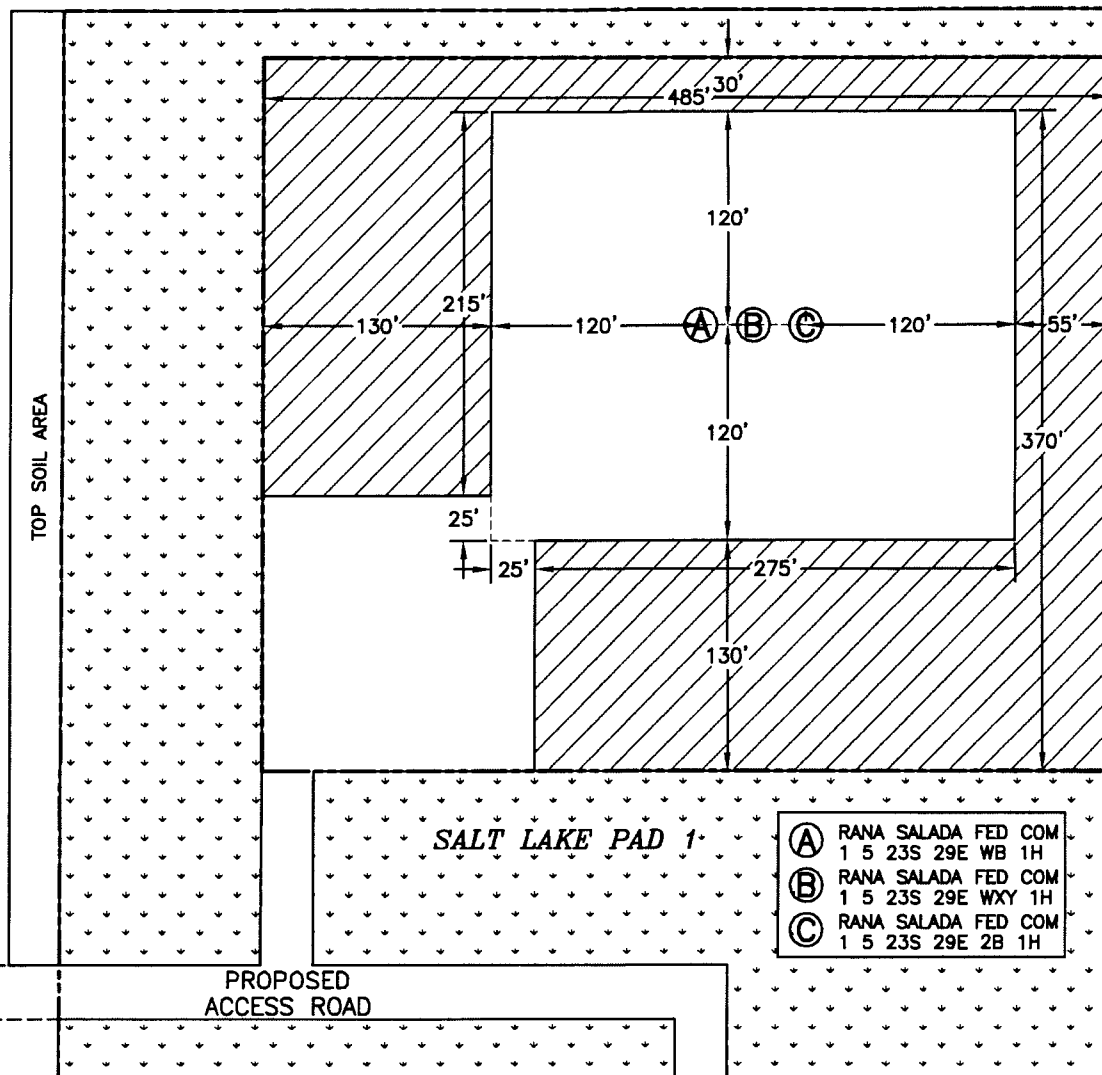
**NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
RANA SALADA FED COM 1 5 23S 29E WXY 1H  
LOCATED 1127 FT. FROM THE NORTH LINE  
AND 365 FT. FROM THE EAST LINE OF  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO**

MAY 3, 2018

SURVEY NO. 6143

**MADRON SURVEYING, INC.** 301 SOUTH CANAL (575) 234-3341 **CARLSBAD, NEW MEXICO**

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
INTERIM SITE BUILD PLAN



0 10 50 100 200  
SCALE 1" = 100'

2.264± ACRES INTERIM PAD RECLAMATION AREA  
3.450± ACRES GRADING SITE RECLAMATION AREA  
2.551± ACRES NON-RECLAIMED AREA  
8.265± ACRES SALT LAKE PAD 1

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RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6143

MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
LOCATION VERIFICATION MAP



USGS QUAD MAP:  
LOVING

NOT TO SCALE

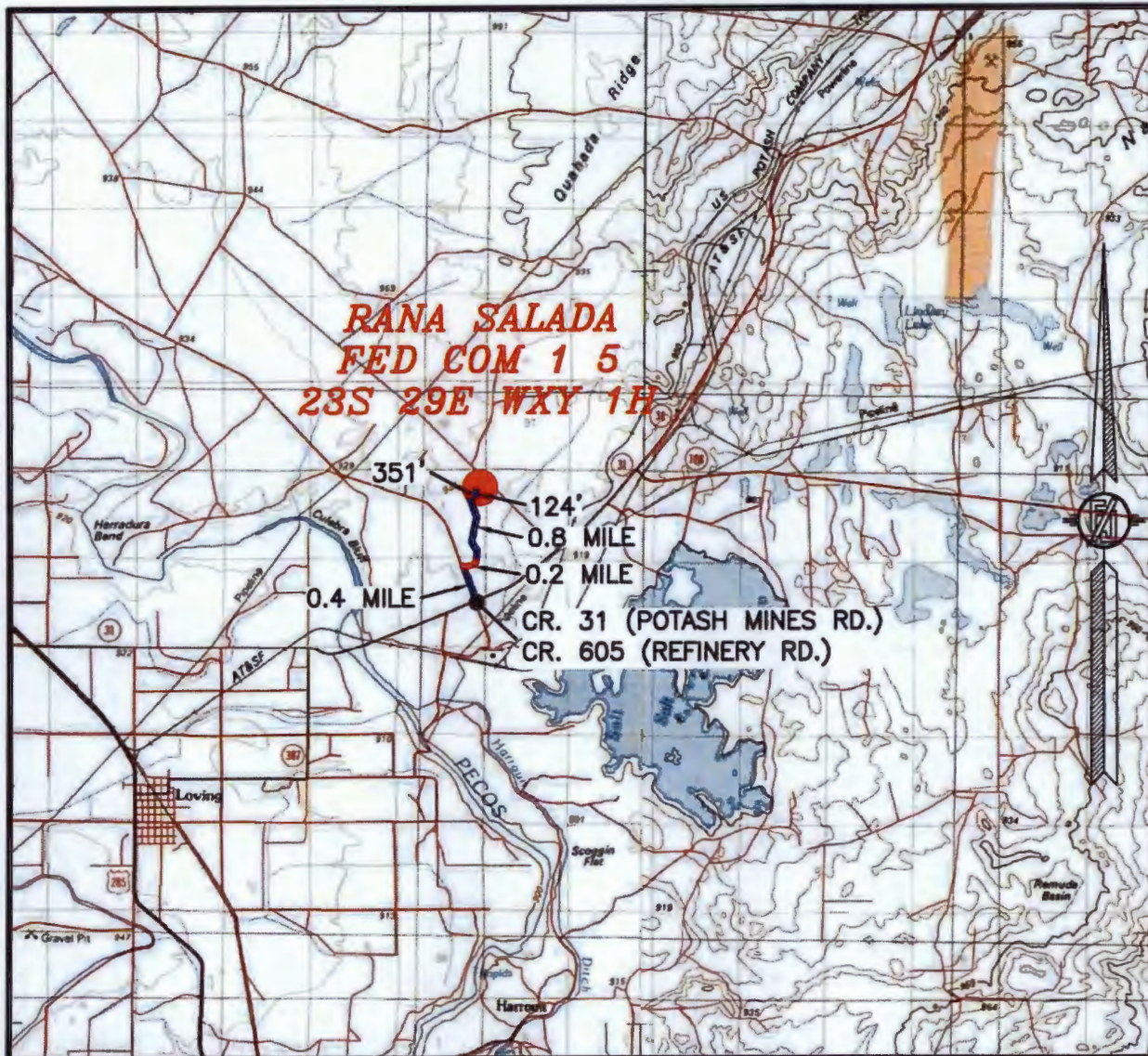
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RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6143

MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
VICINITY MAP



DISTANCES IN MILES

NOT TO SCALE

**DIRECTIONS TO LOCATION**

FROM CR. 31 (POTASH MINES RD.) AND CR. 605 (REFINERY RD.), GO NORTH ON CR. 605 APPROX. 0.4 MILE, TURN RIGHT (EAST) ON CALICHE ROAD AND GO EAST AND NORTHEAST APPROX. 0.2 MILE TO A "Y" IN ROAD, TURN LEFT (NORTH) AND GO APPROX. 0.8 MILE TO A ROAD SURVEY, FOLLOW ROAD SURVEY EAST 351' AND NORTH 124' TO THE SOUTHWEST PAD CORNER FOR THIS LOCATION.

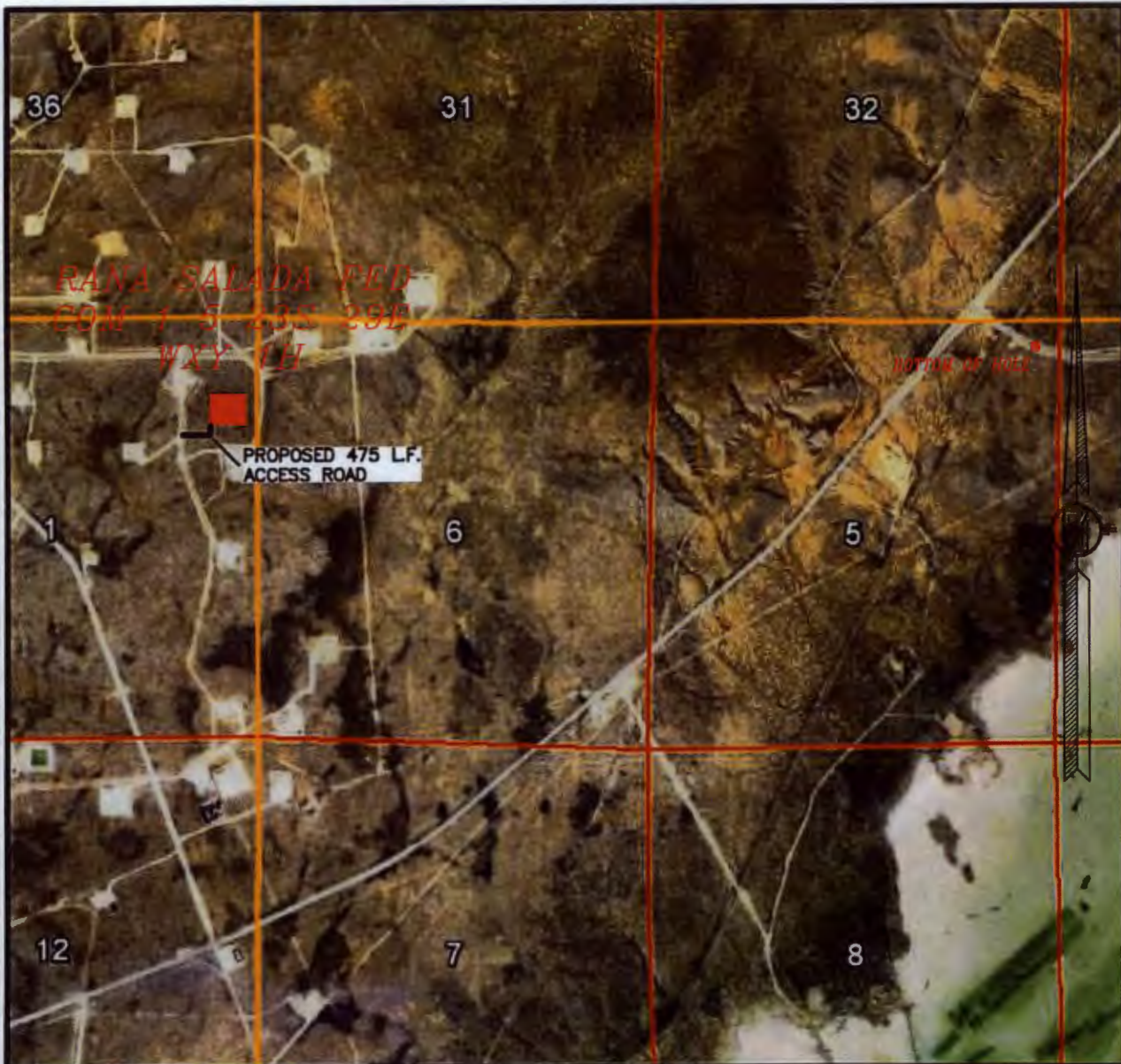
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RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6143

MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
**AERIAL PHOTO**



NOT TO SCALE  
AERIAL PHOTO:  
GOOGLE EARTH  
NOV. 2017

**NOVO OIL AND GAS NORTHERN DELAWARE, LLC**  
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EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6143

MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
AERIAL ACCESS ROUTE MAP



NOT TO SCALE  
AERIAL PHOTO:  
GOOGLE EARTH  
NOV. 2017

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RANA SALADA FED COM 1 5 23S 29E WXY 1H  
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EDDY COUNTY, STATE OF NEW MEXICO

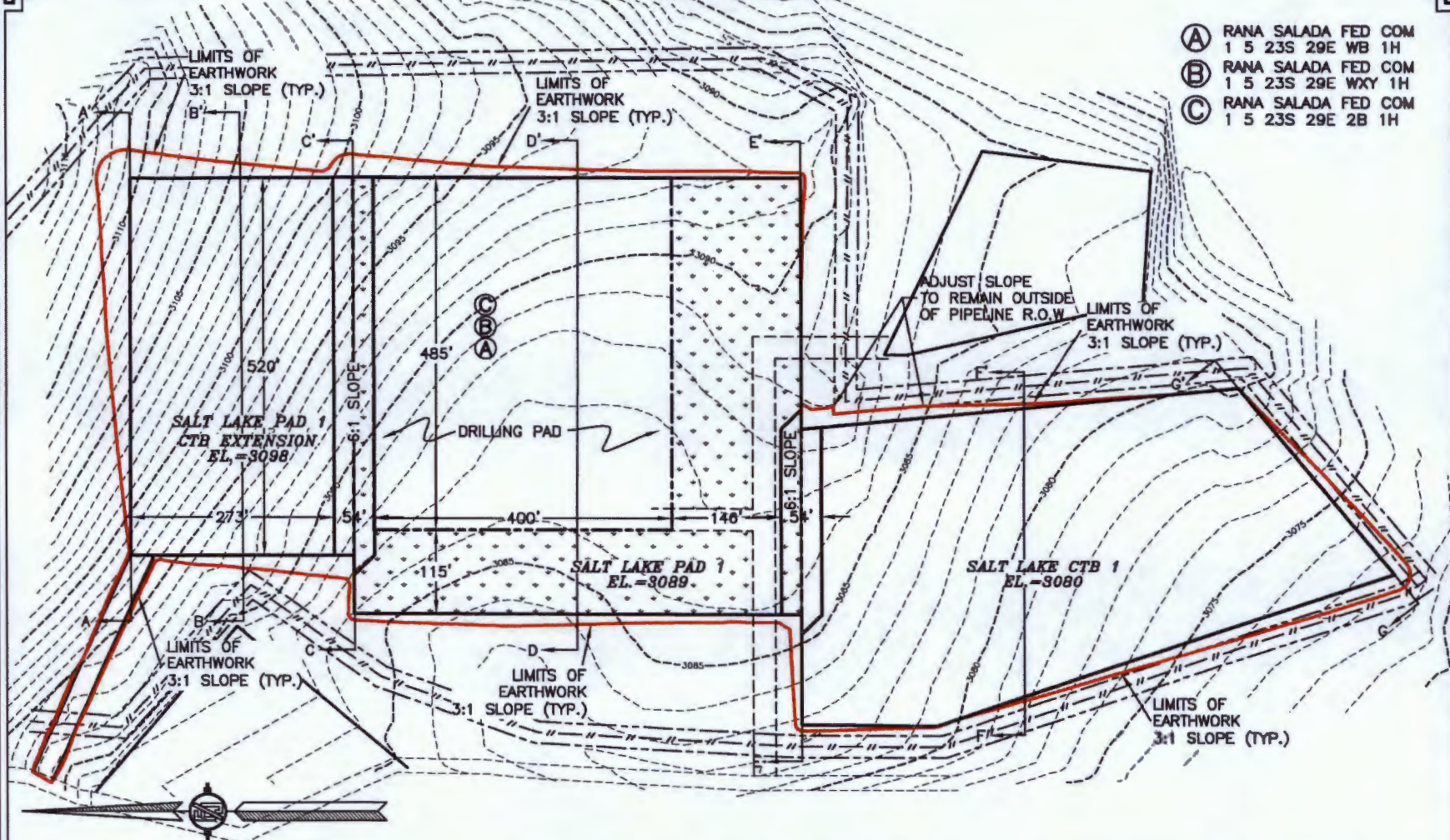
MAY 3, 2018

SURVEY NO. 6143

MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

# PLAN VIEW

- (A) RANA SALADA FED COM  
1 5 23S 29E WB 1H
- (B) RANA SALADA FED COM  
1 5 23S 29E WXY 1H
- (C) RANA SALADA FED COM  
1 5 23S 29E 2B 1H



020 100 200 400  
SCALE 1" = 200'

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
PAD GRADING AND CROSS SECTIONS  
FOR RANA SALADA FED COM 1 5 23S 29E WXY 1H  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

| CUT                                | FILL         | NET               |
|------------------------------------|--------------|-------------------|
| 46251 CU. YD                       | 41381 CU. YD | 4871 CU. YD (CUT) |
| EARTHWORK QUANTITIES ARE ESTIMATED |              |                   |

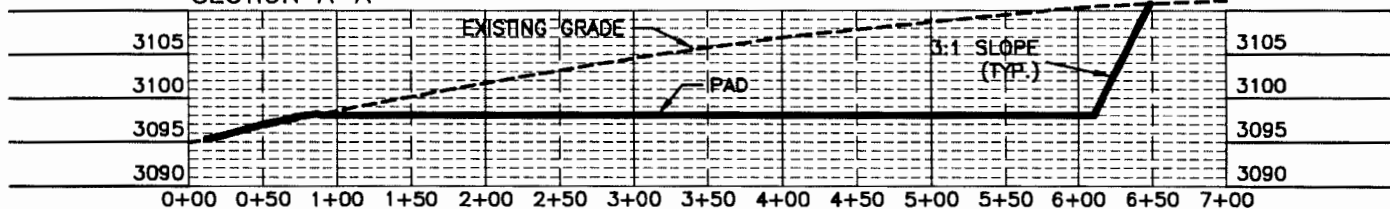
MAY 3, 2018

MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO

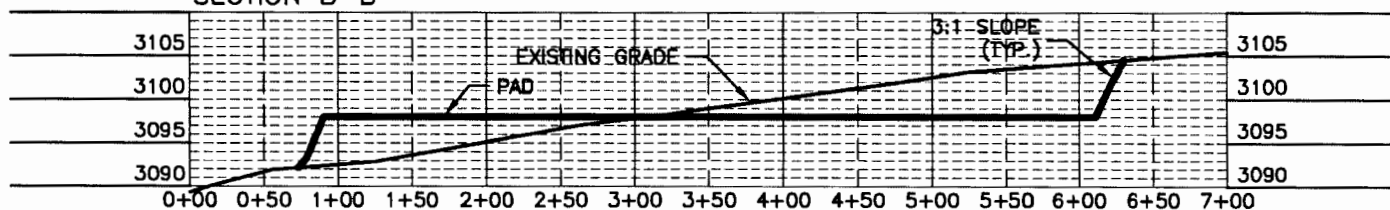
SHEET 1-4  
SURVEY NO. 6143

# CROSS-SECTIONS

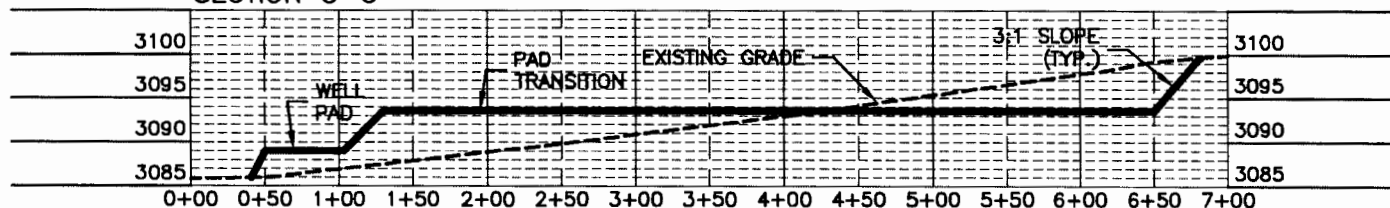
SECTION A-A'



SECTION B-B'



SECTION C-C'



012 60 120 240  
SCALE 1" = 120' - 1" = 20' VER

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
PAD GRADING AND CROSS SECTIONS  
FOR RANA SALADA FED COM 1 5 23S 29E WXY 1H  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

| CUT                                | FILL         | NET               |
|------------------------------------|--------------|-------------------|
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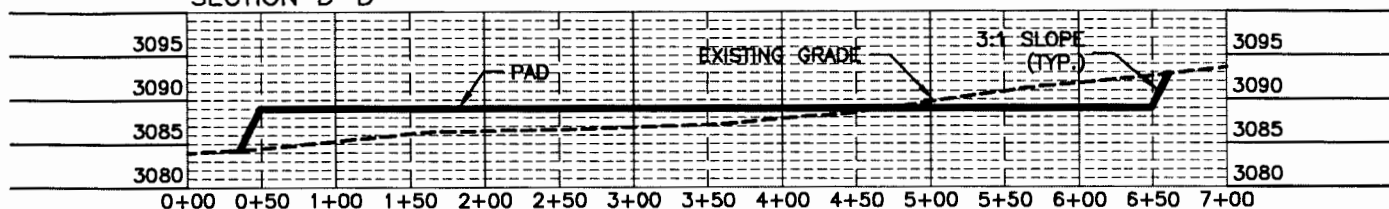
MAY 3, 2018

MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO

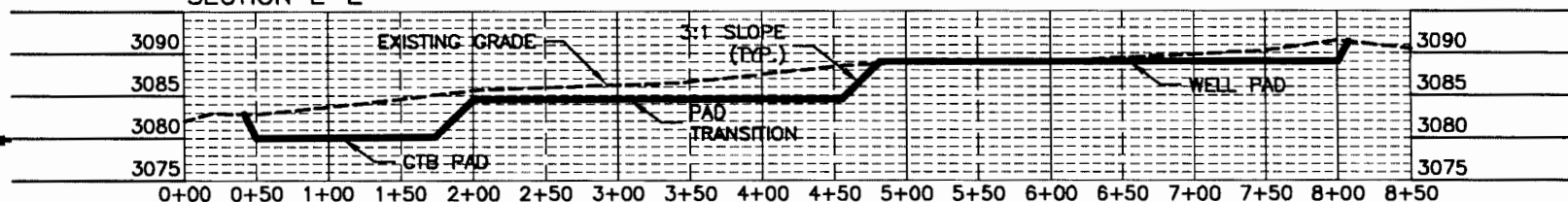
SHEET 2-4  
SURVEY NO. 6143

# CROSS-SECTIONS

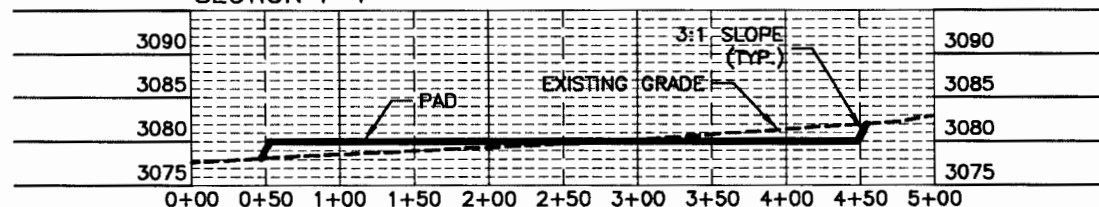
SECTION D-D'



SECTION E-E'



SECTION F-F'



012 60 120 240  
SCALE 1" = 120' - 1" = 20' VER

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
PAD GRADING AND CROSS SECTIONS  
FOR RANA SALADA FED COM 1 5 23S 29E WXY 1H  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

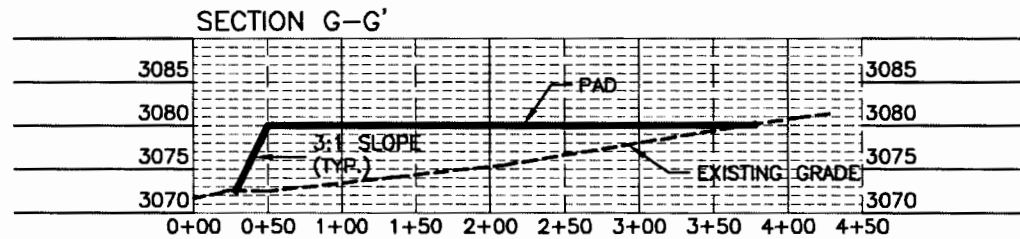
| CUT          | FILL         | NET               |
|--------------|--------------|-------------------|
| 46251 CU. YD | 41381 CU. YD | 4871 CU. YD (CUT) |

EARTHWORK QUANTITIES ARE ESTIMATED

MAY 3, 2018  
MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO  
(575) 234-3341

SHEET 3-4  
SURVEY NO. 6143

# CROSS-SECTIONS



012 60 120 240  
SCALE 1" = 120' - 1" = 20' VER

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
PAD GRADING AND CROSS SECTIONS  
FOR RANA SALADA FED COM 1 5 23S 29E WXY 1H  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

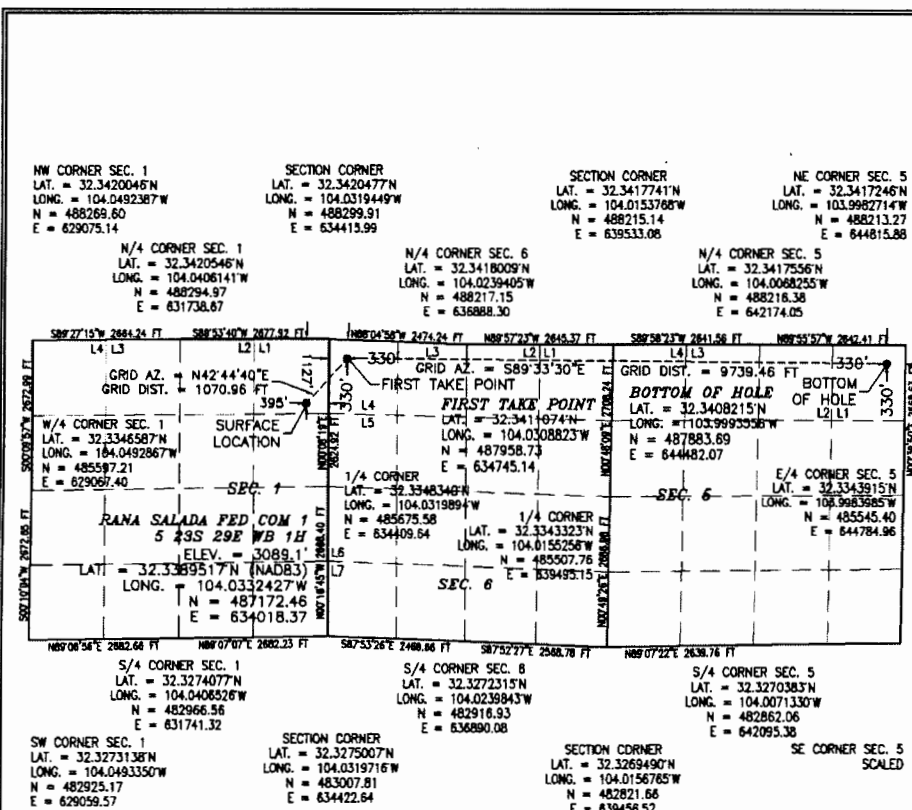
| CUT                                | FILL         | NET               |
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MAY 3, 2018  
MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO  
(575) 234-3341

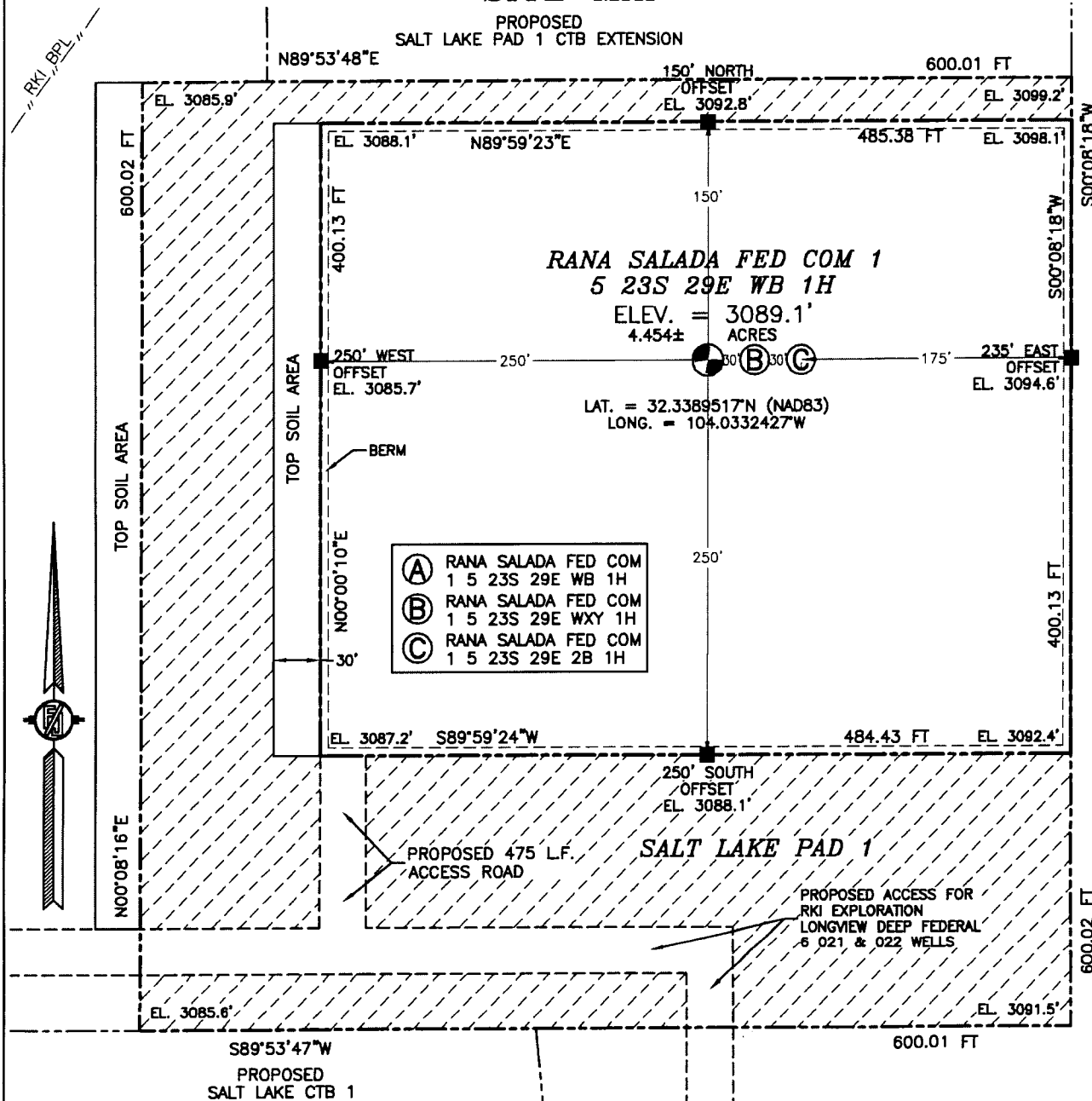
SHEET 4-4  
SURVEY NO. 6143

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

SURVEY NO. 6144



**SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
SITE MAP**



010 50 100 200

SCALE 1" = 100'

**DIRECTIONS TO LOCATION**

FROM CR. 31 (POTASH MINES RD.) AND CR. 805 (REFINERY RD.), GO NORTH ON CR. 805 APPROX. 0.4 MILE, TURN RIGHT (EAST) ON CALICHE ROAD AND GO EAST AND NORTHEAST APPROX. 0.2 MILE TO A "Y" IN ROAD, TURN LEFT (NORTH) AND GO APPROX. 0.8 MILE TO A ROAD SURVEY, FOLLOW ROAD SURVEY EAST 351' AND NORTH 124' TO THE SOUTHWEST PAD CORNER FOR THIS LOCATION.

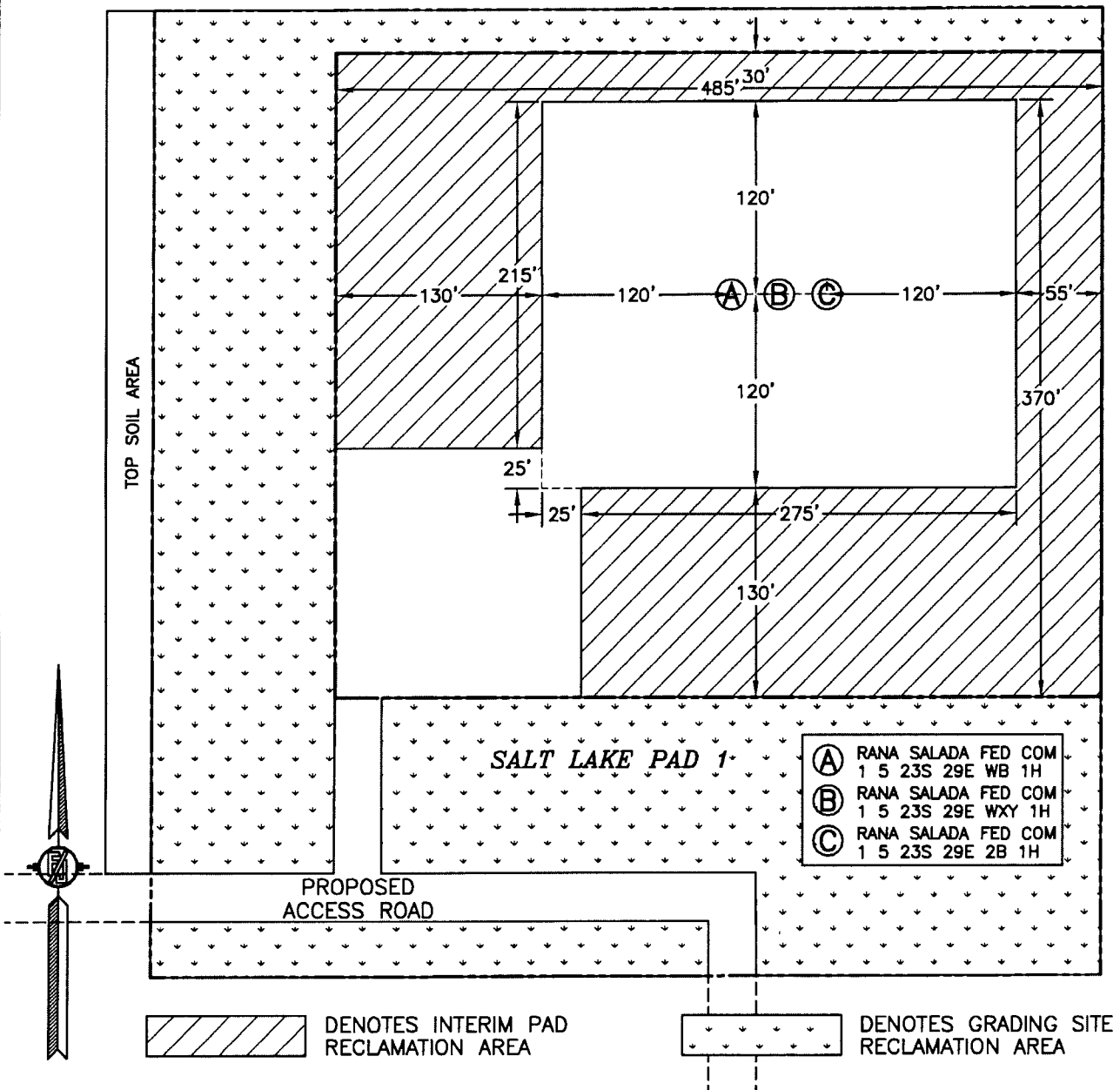
**NOVO OIL AND GAS NORTHERN DELAWARE, LLC**  
**RANA SALADA FED COM 1 5 23S 29E WB 1H**  
 LOCATED 1127 FT. FROM THE NORTH LINE  
 AND 395 FT. FROM THE EAST LINE OF  
 SECTION 1, TOWNSHIP 23 SOUTH,  
 RANGE 28 EAST, N.M.P.M.  
 EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6144

**MADRON SURVEYING, INC.** 301 SOUTH CANAL (575) 234-3341 **CARLSBAD, NEW MEXICO**

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
INTERIM SITE BUILD PLAN



0 10 50 100 200  
SCALE 1" = 100'

2.264± ACRES INTERIM PAD RECLAMATION AREA  
3.450± ACRES GRADING SITE RECLAMATION AREA  
2.551± ACRES NON-RECLAIMED AREA  
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RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6144

MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
LOCATION VERIFICATION MAP



USGS QUAD MAP:  
LOVING

NOT TO SCALE

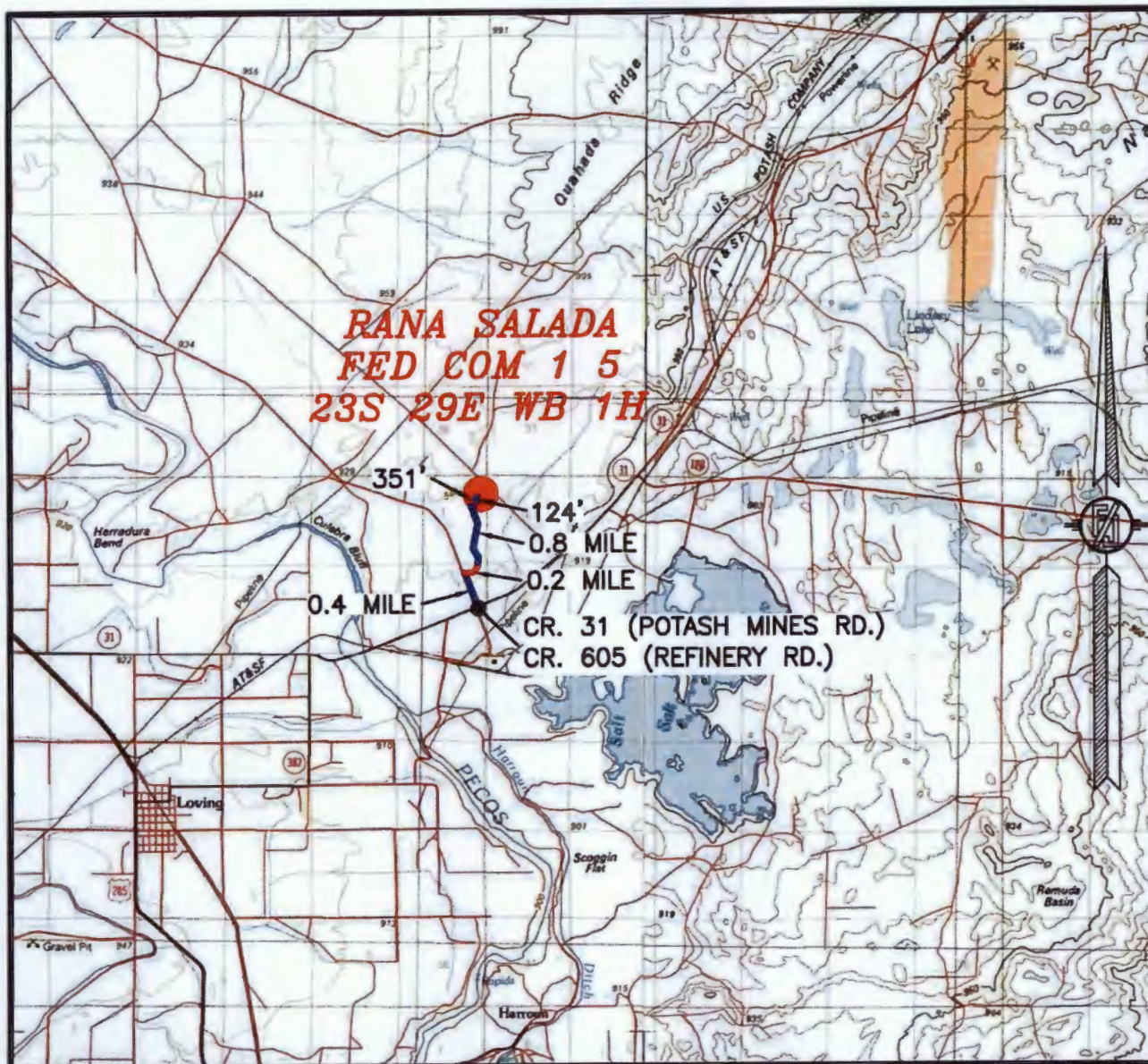
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SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
VICINITY MAP



DISTANCES IN MILES

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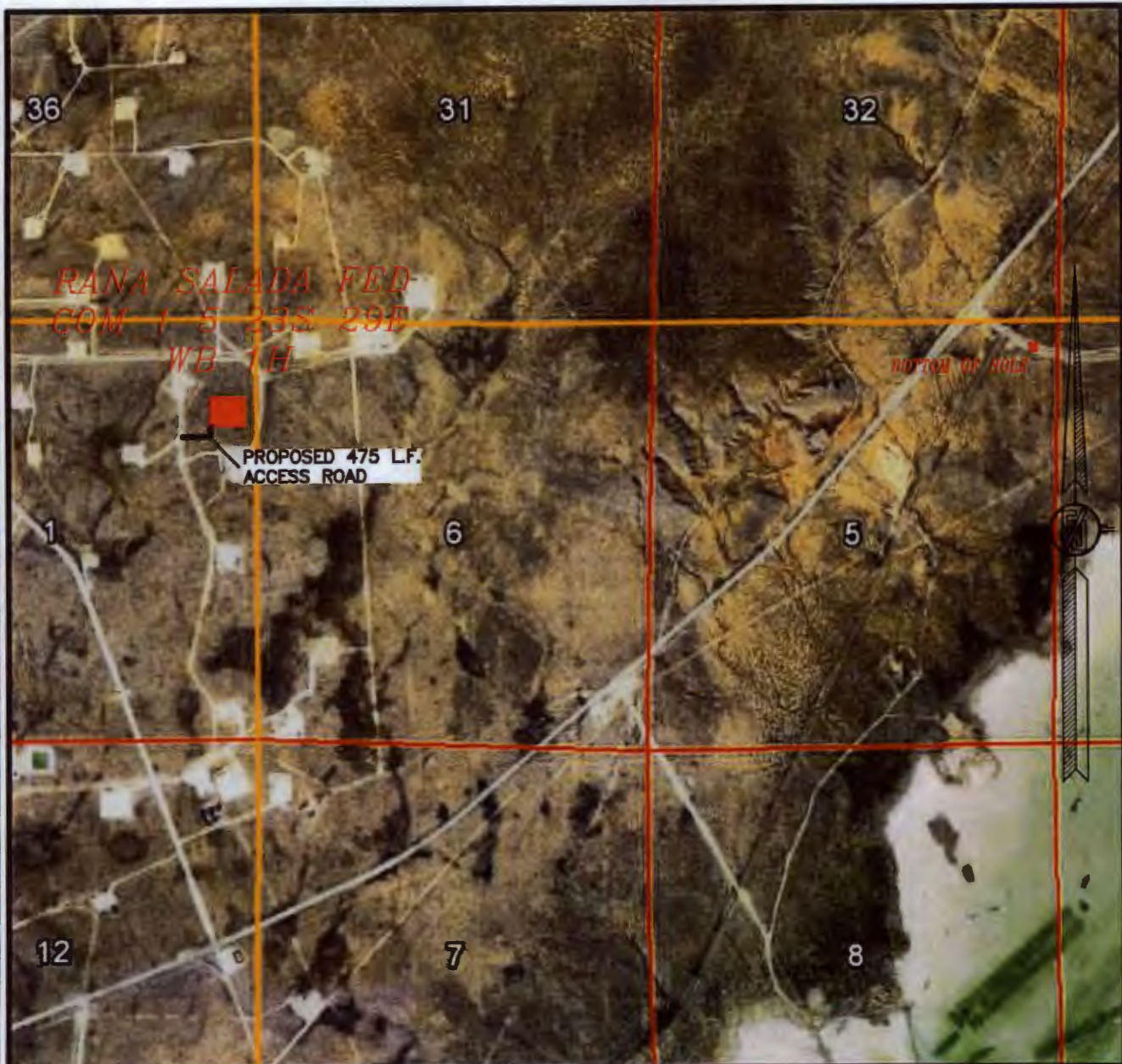
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MAY 3, 2018

SURVEY NO. 6144

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(575) 234-3341

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
AERIAL PHOTO



NOT TO SCALE  
AERIAL PHOTO:  
GOOGLE EARTH  
NOV. 2017

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EDDY COUNTY, STATE OF NEW MEXICO

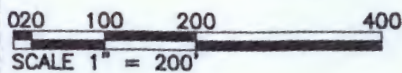
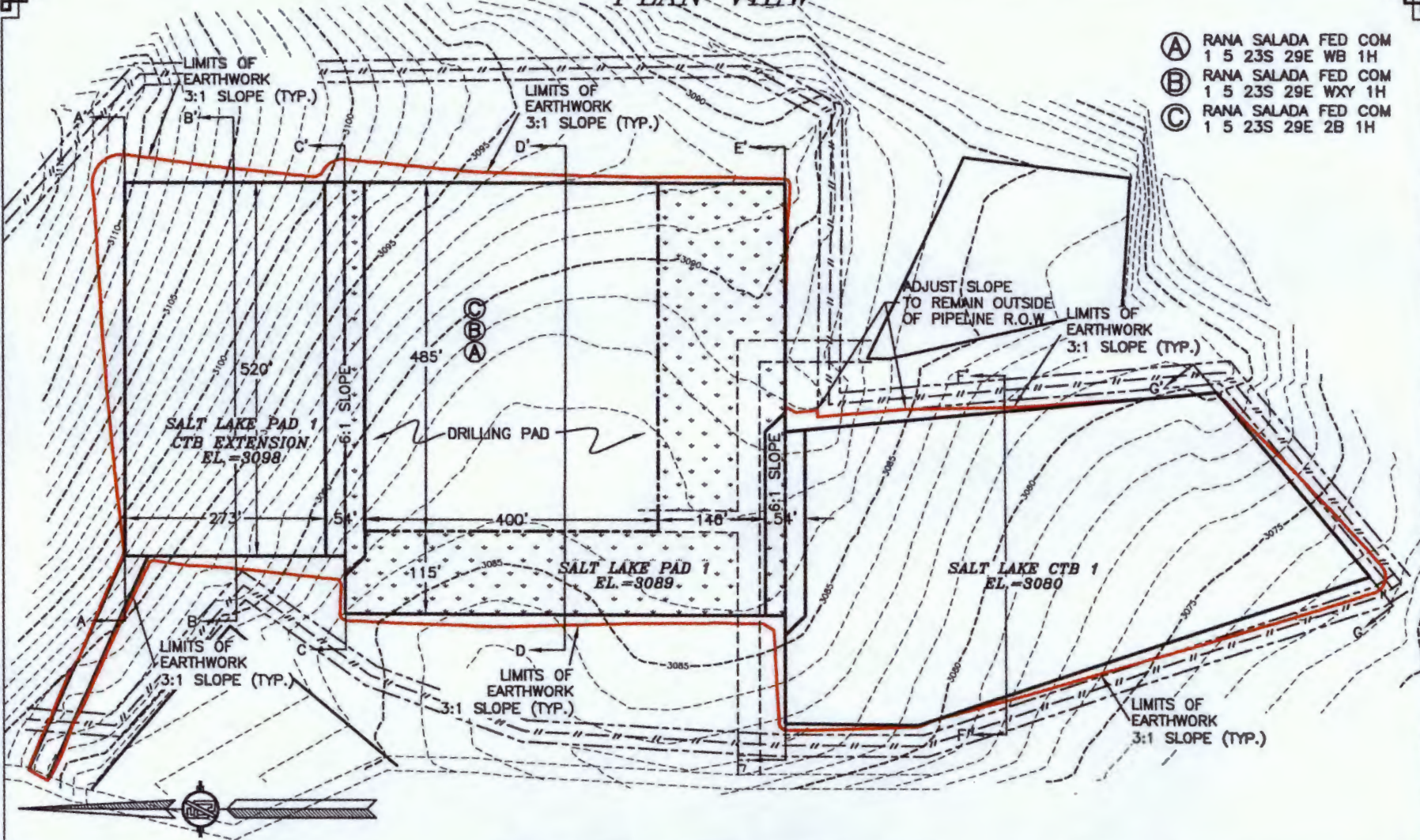
MAY 3, 2018

SURVEY NO. 6144

MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO  
(575) 234-3341

# PLAN VIEW

- (A) RANA SALADA FED COM 1 5 23S 29E WB 1H
- (B) RANA SALADA FED COM 1 5 23S 29E WXY 1H
- (C) RANA SALADA FED COM 1 5 23S 29E 2B 1H



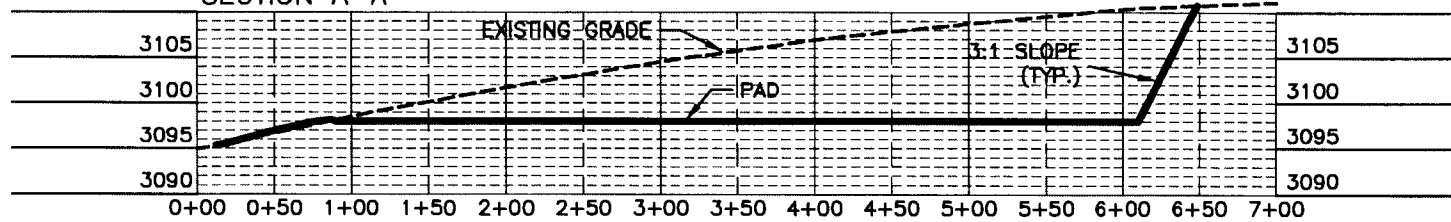
NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
 PAD GRADING AND CROSS SECTIONS  
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 SECTION 1, TOWNSHIP 23 SOUTH,  
 RANGE 28 EAST, N.M.P.M.  
 EDDY COUNTY, STATE OF NEW MEXICO

| CUT          | FILL         | NET               |
|--------------|--------------|-------------------|
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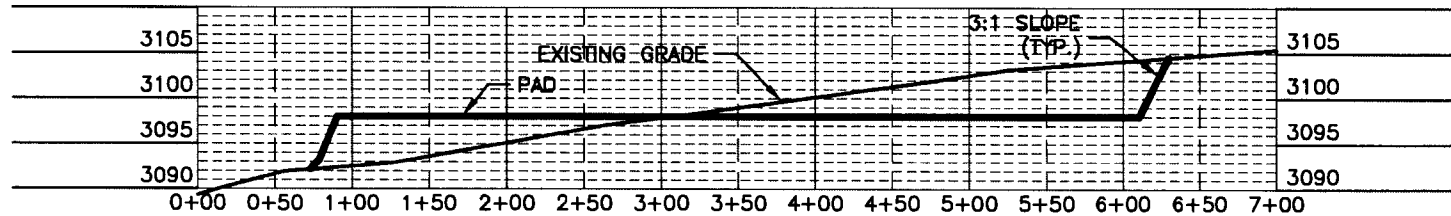
EARTHWORK QUANTITIES ARE ESTIMATED

# CROSS-SECTIONS

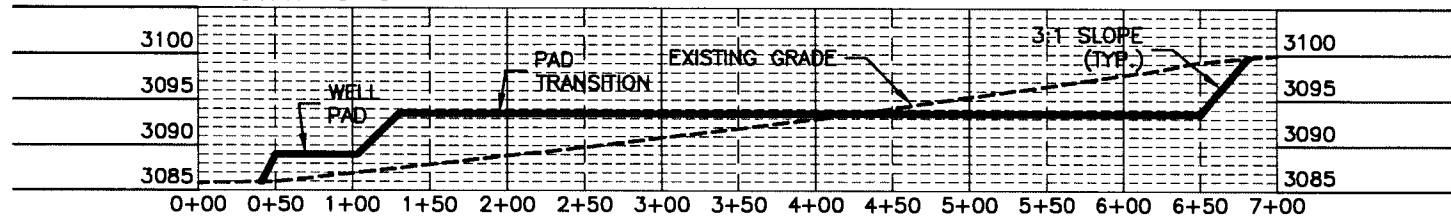
SECTION A-A'



SECTION B-B'



SECTION C-C'



012 60 120 240  
SCALE 1" = 120' - 1" = 20' VER

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
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FOR RANA SALADA FED COM 1 5 23S 29E WB 1H  
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RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

| CUT          | FILL         | NET               |
|--------------|--------------|-------------------|
| 46251 CU. YD | 41381 CU. YD | 4871 CU. YD (CUT) |

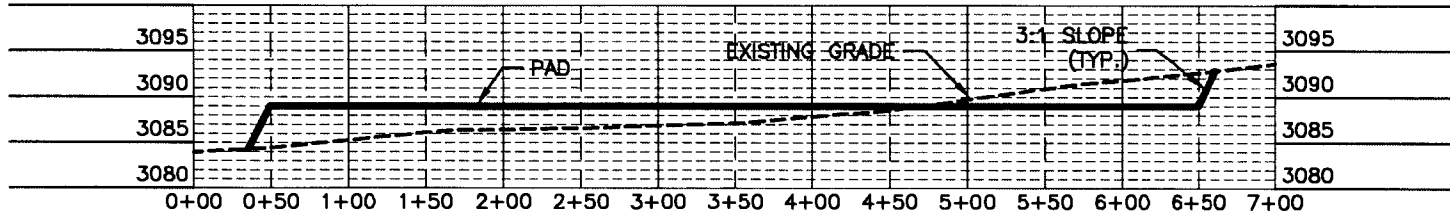
EARTHWORK QUANTITIES ARE ESTIMATED

MAY 3, 2018  
MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO  
(575) 234-3341

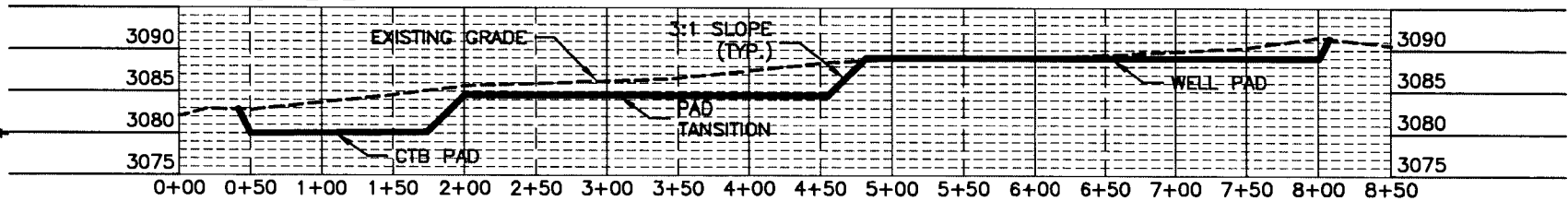
SHEET 2-4  
SURVEY NO. 6144

# CROSS-SECTIONS

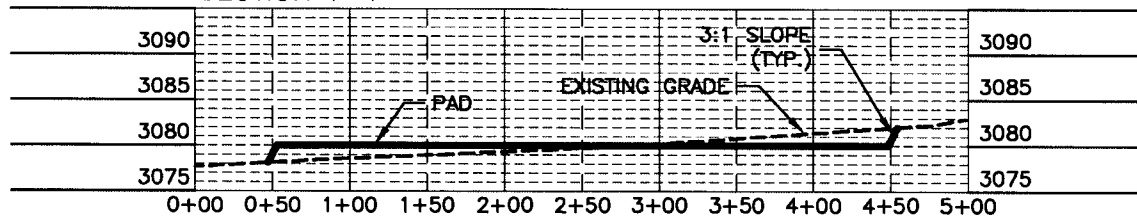
SECTION D-D'



SECTION E-E'



SECTION F-F'



0 12 60 120 240  
SCALE 1" = 120' - 1" = 20' VER

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
PAD GRADING AND CROSS SECTIONS  
FOR RANA SALADA FED COM 1 5 23S 29E WB 1H  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

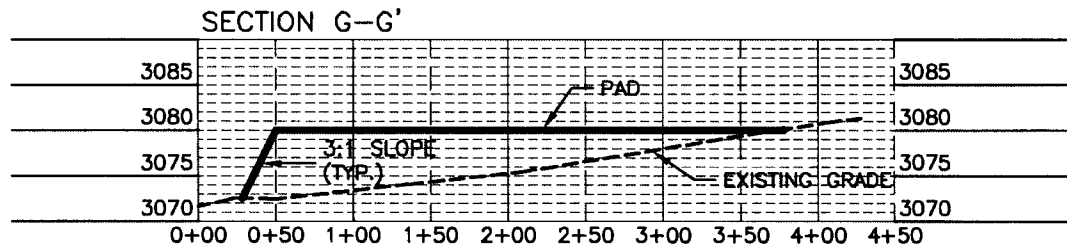
| CUT          | FILL         | NET               |
|--------------|--------------|-------------------|
| 46251 CU. YD | 41381 CU. YD | 4871 CU. YD (CUT) |

EARTHWORK QUANTITIES ARE ESTIMATED

MAY 3, 2018  
MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO  
(575) 234-3341

SHEET 3-4  
SURVEY NO. 6144

# CROSS-SECTIONS



012 60 120 240  
SCALE 1" = 120' - 1" = 20' VER

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
PAD GRADING AND CROSS SECTIONS  
FOR RANA SALADA FED COM 1 5 23S 29E WB 1H  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

| CUT          | FILL         | NET               |
|--------------|--------------|-------------------|
| 46251 CU. YD | 41381 CU. YD | 4871 CU. YD (CUT) |

EARTHWORK QUANTITIES ARE ESTIMATED

MAY 3, 2018  
MADRON SURVEYING, INC. 301 SOUTH CANAL CARLSBAD, NEW MEXICO  
(575) 234-3341

SHEET 4-4  
SURVEY NO. 6144

SECTION 1, TOWNSHIP 23 SOUTH, RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO  
AERIAL ACCESS ROUTE MAP



NOT TO SCALE  
AERIAL PHOTO:  
GOOGLE EARTH  
NOV. 2017

NOVO OIL AND GAS NORTHERN DELAWARE, LLC  
RANA SALADA FED COM 1 5 23S 29E WB 1H  
LOCATED 1127 FT. FROM THE NORTH LINE  
AND 395 FT. FROM THE EAST LINE OF  
SECTION 1, TOWNSHIP 23 SOUTH,  
RANGE 28 EAST, N.M.P.M.  
EDDY COUNTY, STATE OF NEW MEXICO

MAY 3, 2018

SURVEY NO. 6144

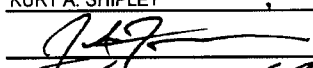
MADRON SURVEYING, INC. 301 SOUTH CANAL (575) 234-3341 CARLSBAD, NEW MEXICO

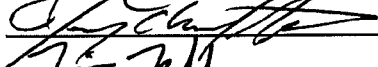


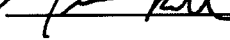
NOVO OIL & GAS NORTHERN DELAWARE, LLC  
AUTHORIZATION FOR EXPENDITURE  
105 North Hudson Ave. Suite 500  
Oklahoma City, Oklahoma 73102  
405.809.1825

| WELL NAME            | Rana Salada Fed Com 1 5 23S 29E WXY 1H                                          | AFE TYPE  | Development       | AFE NUMBER       | 2015004           |
|----------------------|---------------------------------------------------------------------------------|-----------|-------------------|------------------|-------------------|
| LATERAL LOCATION     | Twn-23S, Rge-29E, Sec-8/5, Slot-1, Az-E                                         | FIELD     | Northern Delaware | DRILLING DAYS    | 32                |
| SURFACE LOCATION     | Twn-23S, Rge-29E, Sec-1 NE/4                                                    | FORMATION | Wolfcamp XY       | DEPTH (TVD/TMD)  | 10,005' / 20,805' |
| BOTTOM-HOLE LOCATION | Twn-23S, Rge-29E, Sec-5 NE/4                                                    | COUNTY    | Eddy County       | STATE            | New Mexico        |
| PROJECT DESCRIPTION  | Drilling, completion, facilities and pipeline costs for 9,900' horizontal well. |           |                   |                  |                   |
| ACCT. CODE           | DESCRIPTION OF EXPENDITURE                                                      |           | COST ESTIMATE     |                  |                   |
|                      | INTANGIBLE COSTS                                                                |           | DRILLING (300)    | COMPLETION (600) | TOTAL             |
| 01                   | SURVEY/PERMITS/DAMAGES/LEGAL                                                    |           | \$ 25,000         |                  | \$ 25,000         |
| 02                   | LOCATION & ROAD                                                                 |           | 50,000            |                  | 50,000            |
| 03                   | RIG MOVE                                                                        |           | 50,000            |                  | 50,000            |
| 04                   | DRILLING - FOOTAGE                                                              |           | 50,000            |                  | 50,000            |
| 05                   | DRILLING - DAYWORK                                                              |           | 677,000           |                  | 677,000           |
| 06                   | COMPLETION/WORKOVER RIG                                                         |           |                   | 60,000           | 60,000            |
| 07                   | COIL TUBING/SNUBBING UNIT                                                       |           |                   | 160,000          | 160,000           |
| 08                   | SLICKLINE/SWABBING                                                              |           |                   |                  | 0                 |
| 09                   | BITS                                                                            |           | 100,000           | 5,000            | 105,000           |
| 10                   | DIRECTIONAL SERVICES                                                            |           | 178,500           |                  | 178,500           |
| 11                   | CASING CREW                                                                     |           | 80,000            |                  | 80,000            |
| 12                   | TOOL & EQUIPMENT RENTAL                                                         |           | 50,000            | 80,000           | 130,000           |
| 13                   | FUEL & POWER                                                                    |           | 204,000           | 20,000           | 224,000           |
| 14                   | DIESEL - BASE FOR MUD                                                           |           | 100,000           |                  | 100,000           |
| 15                   | MUD LOGGING & GEOLOGIST                                                         |           | 24,000            |                  | 24,000            |
| 16                   | DISPOSAL, RESTORATION & BACKFILL                                                |           | 150,000           |                  | 150,000           |
| 17                   | TRUCKING                                                                        |           | 120,000           | 40,000           | 160,000           |
| 18                   | TESTING                                                                         |           |                   |                  | 0                 |
| 19                   | CEMENTING                                                                       |           | 150,000           |                  | 150,000           |
| 20                   | PERFORATING                                                                     |           |                   | 358,000          | 358,000           |
| 21                   | CASED HOLE LOGS                                                                 |           |                   |                  | 0                 |
| 22                   | DOWNHOLE TOOLS & SERVICE                                                        |           |                   | 75,000           | 75,000            |
| 23                   | OTHER STIMULATION                                                               |           |                   | 100,000          | 100,000           |
| 24                   | FORMATION STIMULATION                                                           |           |                   | 4,500,000        | 4,500,000         |
| 25                   | CONSULTING SERVICES                                                             |           |                   | 20,000           | 20,000            |
| 26                   | SUPERVISION                                                                     |           | 100,000           | 100,000          | 200,000           |
| 27                   | CONTRACT LABOR                                                                  |           | 2,000             | 20,000           | 22,000            |
| 28                   | OTHER LABOR                                                                     |           |                   | 100,000          | 100,000           |
| 29                   | COMPANY CONSULTING/SUPV                                                         |           |                   |                  | 0                 |
| 30                   | WATER                                                                           |           | 20,000            | 891,000          | 911,000           |
| 31                   | FLUIDS & CHEMICALS                                                              |           | 150,000           |                  | 150,000           |
| 32                   | CORING & ANALYSIS                                                               |           |                   |                  | 0                 |
| 33                   | COMMUNICATIONS                                                                  |           | 10,000            | 10,000           | 20,000            |
| 34                   | BOP TESTING                                                                     |           | 10,000            | 10,000           | 20,000            |
| 35                   | DRILL STEM TEST                                                                 |           |                   |                  | 0                 |
| 36                   | FISHING TOOLS & SERVICES                                                        |           |                   |                  | 0                 |
| 37                   | INSPECTIONS                                                                     |           | 10,000            | 5,000            | 15,000            |
| 38                   | WIRELINE SERVICES                                                               |           |                   |                  | 0                 |
| 39                   | ENGINEERING & GEOLOGY - FIELD                                                   |           |                   |                  | 0                 |
| 40                   | ENGINEERING & GEOLOGY - OFFICE                                                  |           |                   |                  | 0                 |
| 41                   | MULTISHOT & GYRO                                                                |           |                   |                  | 0                 |
| 42                   | RE-ENTRY SERVICES                                                               |           |                   |                  | 0                 |
| 43                   | CAMPS & TRAILERS                                                                |           | 15,000            | 15,000           | 30,000            |
| 44                   | SAFETY EQUIPMENT & H2S                                                          |           | 10,000            | 5,000            | 15,000            |
| 45                   | CONTINGENCY                                                                     |           |                   |                  | 0                 |
| 46                   | INSURANCE                                                                       |           | 5,000             | 2,000            | 7,000             |
| 47                   | MISCELLANEOUS                                                                   |           | 10,000            | 1,000            | 11,000            |
| 48                   | OUTSIDE OPERATED                                                                |           |                   |                  | 0                 |
| 49                   | SIM-OPS                                                                         |           |                   |                  | 0                 |
|                      | TOTAL INTANGIBLE COSTS                                                          |           | \$ 2,350,500      | \$ 6,577,000     | \$ 8,927,500      |
|                      | TANGIBLE COSTS                                                                  |           | DRILLING (400)    | COMPLETION (600) | TOTAL             |
|                      |                                                                                 |           |                   |                  |                   |
| 01                   | CASING - CONDUCTOR                                                              |           |                   |                  |                   |
| 02                   | CASING - SURFACE                                                                |           | \$ 19,290         |                  | \$ 19,290         |
| 03                   | CASING - INTERMEDIATE                                                           |           | 129,150           |                  | 129,150           |
| 04                   | CASING - INTERMEDIATE 2                                                         |           | 266,000           |                  | 266,000           |
| 05                   | CASING - PRODUCTION / LINER                                                     |           | 384,893           |                  | 384,893           |
| 06                   | SUBSURFACE EQUIPMENT                                                            |           | 25,000            |                  | 25,000            |
| 07                   | PRODUCTION TUBING                                                               |           |                   | 48,324           | 48,324            |
| 08                   | SUBSURFACE PUMPING EQUIPMENT                                                    |           |                   |                  | 0                 |
| 09                   | WELLHEAD EQUIPMENT                                                              |           | 60,000            | 10,000           | 70,000            |
| 10                   | FLOWLINES                                                                       |           |                   | 50,000           | 50,000            |
| 11                   | SURFACE PUMPING EQUIPMENT                                                       |           |                   |                  | 0                 |
| 12                   | LINER HANGER & ASSOC EQUIP                                                      |           |                   |                  | 0                 |
| 13                   | VALVES & FITTINGS                                                               |           |                   | 10,000           | 10,000            |
| 15                   | RODS                                                                            |           |                   |                  | 0                 |
| 17                   | TRUCKING                                                                        |           | 40,000            | 2,000            | 42,000            |
| 20                   | RE-ENTRY EQUIPMENT                                                              |           |                   |                  | 0                 |
| 34                   | PRODUCTION EQUIPMENT                                                            |           |                   | 200,000          | 200,000           |
| 47                   | MISCELLANEOUS                                                                   |           | 10,000            | 10,000           | 20,000            |
| 48                   | OUTSIDE OPERATED                                                                |           |                   |                  | 0                 |
| 49                   | TANGIBLE EQUIP-ACQUISITIONS                                                     |           |                   |                  | 0                 |
|                      | TOTAL INTANGIBLE COSTS                                                          |           | \$ 934,333        | \$ 330,324       | \$ 1,264,657      |
|                      | TOTAL ESTIMATED WELL COST                                                       |           | \$ 3,284,833      | \$ 6,907,324     | \$ 10,192,157     |

PREPARED BY: KURT A. SHIPLEY

OPERATOR'S APPROVAL: 

OPERATOR'S APPROVAL: 

OPERATOR'S APPROVAL: 

Vice President - Operations

Chief Financial Officer

Executive VP - Exploration

Chief Executive Officer

DATE: 4/23/2018

DATE: 4/23/2018

DATE: 4/23/18

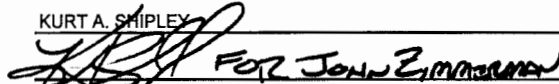
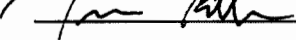
DATE: 4/23/18

The costs of this AFE are estimates only. Participants in this project agree to pay their proportionate share of the actual costs. Please make a note that some expenditures such as tubing, artificial lift or surface equipment may occur up to one year after the project has been initiated.



NOVO OIL & GAS NORTHERN DELAWARE, LLC  
AUTHORIZATION FOR EXPENDITURE  
105 North Hudson Ave, Suite 500  
Oklahoma City, Oklahoma 73102  
405.609.1625

| WELL NAME            | Rana Salada Fed Com 1 5 23S 29E WB 1H                                           | AFE TYPE  | Development       | AFE NUMBER       | 2015003           |
|----------------------|---------------------------------------------------------------------------------|-----------|-------------------|------------------|-------------------|
| LATERAL LOCATION     | Twn-23S, Rge-29E, Sec-6/5, Slot-1, Az-E                                         | FIELD     | Northern Delaware | DRILLING DAYS    | 32                |
| SURFACE LOCATION     | Twn-23S, Rge-29E, Sec-1 NE/4                                                    | FORMATION | Wolfcamp B        | DEPTH (TVD/TMD)  | 10,875' / 21,475' |
| BOTTOM-HOLE LOCATION | Twn-23S, Rge-29E, Sec-5 NE/4                                                    | COUNTY    | Eddy County       | STATE            | New Mexico        |
| PROJECT DESCRIPTION  | Drilling, completion, facilities and pipeline costs for 9,900' horizontal well. |           |                   |                  |                   |
| ACCT. CODE           | DESCRIPTION OF EXPENDITURE                                                      |           | COST ESTIMATE     |                  |                   |
|                      | INTANGIBLE COSTS                                                                |           | DRILLING (300)    | COMPLETION (500) | TOTAL             |
| 01                   | SURVEY/PERMITS/DAMAGES/LEGAL                                                    |           | \$ 25,000         |                  | \$ 25,000         |
| 02                   | LOCATION & ROAD                                                                 |           | 50,000            |                  | 50,000            |
| 03                   | RIG MOVE                                                                        |           | 50,000            |                  | 50,000            |
| 04                   | DRILLING - FOOTAGE                                                              |           | 50,000            |                  | 50,000            |
| 05                   | DRILLING - DAYWORK                                                              |           | 677,000           |                  | 677,000           |
| 06                   | COMPLETION/WORKOVER RIG                                                         |           |                   | 60,000           | 60,000            |
| 07                   | COIL TUBING/SNUBBING UNIT                                                       |           |                   | 160,000          | 160,000           |
| 08                   | SLICKLINE/SWABBING                                                              |           |                   |                  | 0                 |
| 09                   | BITS                                                                            |           | 100,000           | 5,000            | 105,000           |
| 10                   | DIRECTIONAL SERVICES                                                            |           | 178,500           |                  | 178,500           |
| 11                   | CASING CREW                                                                     |           | 80,000            |                  | 80,000            |
| 12                   | TOOL & EQUIPMENT RENTAL                                                         |           | 50,000            | 80,000           | 130,000           |
| 13                   | FUEL & POWER                                                                    |           | 204,000           | 20,000           | 224,000           |
| 14                   | DIESEL - BASE FOR MUD                                                           |           | 100,000           |                  | 100,000           |
| 15                   | MUD LOGGING & GEOLOGIST                                                         |           | 24,000            |                  | 24,000            |
| 16                   | DISPOSAL, RESTORATION & BACKFILL                                                |           | 150,000           |                  | 150,000           |
| 17                   | TRUCKING                                                                        |           | 120,000           | 40,000           | 160,000           |
| 18                   | TESTING                                                                         |           |                   |                  | 0                 |
| 19                   | CEMENTING                                                                       |           | 150,000           |                  | 150,000           |
| 20                   | PERFORATING                                                                     |           |                   | 358,000          | 358,000           |
| 21                   | CASED HOLE LOGS                                                                 |           |                   |                  | 0                 |
| 22                   | DOWNHOLE TOOLS & SERVICE                                                        |           |                   | 75,000           | 75,000            |
| 23                   | OTHER STIMULATION                                                               |           |                   | 100,000          | 100,000           |
| 24                   | FORMATION STIMULATION                                                           |           |                   | 4,500,000        | 4,500,000         |
| 25                   | CONSULTING SERVICES                                                             |           |                   | 20,000           | 20,000            |
| 26                   | SUPERVISION                                                                     |           | 100,000           | 100,000          | 200,000           |
| 27                   | CONTRACT LABOR                                                                  |           | 2,000             | 20,000           | 22,000            |
| 28                   | OTHER LABOR                                                                     |           |                   | 100,000          | 100,000           |
| 29                   | COMPANY CONSULTING/SUPV                                                         |           |                   |                  | 0                 |
| 30                   | WATER                                                                           |           | 20,000            | 891,000          | 911,000           |
| 31                   | FLUIDS & CHEMICALS                                                              |           | 150,000           |                  | 150,000           |
| 32                   | CORING & ANALYSIS                                                               |           |                   |                  | 0                 |
| 33                   | COMMUNICATIONS                                                                  |           | 10,000            | 10,000           | 20,000            |
| 34                   | BOP TESTING                                                                     |           | 10,000            | 10,000           | 20,000            |
| 35                   | DRILL STEM TEST                                                                 |           |                   |                  | 0                 |
| 36                   | FISHING TOOLS & SERVICES                                                        |           |                   |                  | 0                 |
| 37                   | INSPECTIONS                                                                     |           | 10,000            | 5,000            | 15,000            |
| 38                   | WIRELINE SERVICES                                                               |           |                   |                  | 0                 |
| 39                   | ENGINEERING & GEOLOGY - FIELD                                                   |           |                   |                  | 0                 |
| 40                   | ENGINEERING & GEOLOGY - OFFICE                                                  |           |                   |                  | 0                 |
| 41                   | MULTISHOT & GYRO                                                                |           |                   |                  | 0                 |
| 42                   | RE-ENTRY SERVICES                                                               |           |                   |                  | 0                 |
| 43                   | CAMPS & TRAILERS                                                                |           | 15,000            | 15,000           | 30,000            |
| 44                   | SAFETY EQUIPMENT & H2S                                                          |           | 10,000            | 5,000            | 15,000            |
| 45                   | CONTINGENCY                                                                     |           |                   |                  | 0                 |
| 46                   | INSURANCE                                                                       |           | 5,000             | 2,000            | 7,000             |
| 47                   | MISCELLANEOUS                                                                   |           | 10,000            | 1,000            | 11,000            |
| 48                   | OUTSIDE OPERATED                                                                |           |                   |                  | 0                 |
| 49                   | SIM-OPS                                                                         |           |                   |                  | 0                 |
|                      | TOTAL INTANGIBLE COSTS                                                          |           | \$ 2,350,500      | \$ 6,577,000     | \$ 8,927,500      |
|                      | TANGIBLE COSTS                                                                  |           | DRILLING (400)    | COMPLETION (600) | TOTAL             |
|                      |                                                                                 |           |                   |                  |                   |
| 01                   | CASING - CONDUCTOR                                                              |           |                   |                  |                   |
| 02                   | CASING - SURFACE                                                                |           | \$ 19,290         |                  | \$ 19,290         |
| 03                   | CASING - INTERMEDIATE                                                           |           | 129,150           |                  | 129,150           |
| 04                   | CASING - INTERMEDIATE 2                                                         |           | 266,000           |                  | 266,000           |
| 05                   | CASING - PRODUCTION / LINER                                                     |           | 397,288           |                  | 397,288           |
| 06                   | SUBSURFACE EQUIPMENT                                                            |           | 25,000            |                  | 25,000            |
| 07                   | PRODUCTION TUBING                                                               |           |                   | 51,560           | 51,560            |
| 08                   | SUBSURFACE PUMPING EQUIPMENT                                                    |           |                   |                  | 0                 |
| 09                   | WELLHEAD EQUIPMENT                                                              |           | 60,000            | 10,000           | 70,000            |
| 10                   | FLOWLINES                                                                       |           |                   | 50,000           | 50,000            |
| 11                   | SURFACE PUMPING EQUIPMENT                                                       |           |                   |                  | 0                 |
| 12                   | LINER HANGER & ASSOC EQUIP                                                      |           |                   |                  | 0                 |
| 13                   | VALVES & FITTINGS                                                               |           |                   | 10,000           | 10,000            |
| 15                   | RODS                                                                            |           |                   |                  | 0                 |
| 17                   | TRUCKING                                                                        |           | 40,000            | 2,000            | 42,000            |
| 20                   | RE-ENTRY EQUIPMENT                                                              |           |                   |                  | 0                 |
| 34                   | PRODUCTION EQUIPMENT                                                            |           |                   | 200,000          | 200,000           |
| 47                   | MISCELLANEOUS                                                                   |           | 10,000            | 10,000           | 20,000            |
| 48                   | OUTSIDE OPERATED                                                                |           |                   |                  | 0                 |
| 49                   | TANGIBLE EQUIP-ACQUISITIONS                                                     |           |                   |                  | 0                 |
|                      | TOTAL INTANGIBLE COSTS                                                          |           | \$ 946,728        | \$ 333,560       | \$ 1,280,288      |
|                      | TOTAL ESTIMATED WELL COST                                                       |           | \$ 3,297,228      | \$ 6,910,560     | \$ 10,207,788     |

|                      |                                                                                     |                             |       |           |
|----------------------|-------------------------------------------------------------------------------------|-----------------------------|-------|-----------|
| PREPARED BY:         | KURT A. SHIPLEY                                                                     | Vice President - Operations | DATE: | 4/23/2018 |
| OPERATOR'S APPROVAL: |  | Chief Financial Officer     | DATE: | 4/23/2018 |
| OPERATOR'S APPROVAL: |  | Executive VP - Exploration  | DATE: | 4/23/18   |
| OPERATOR'S APPROVAL: |  | Chief Executive Officer     | DATE: | 4/23/18   |

The costs of this AFE are estimates only. Participants in this project agree to pay their proportionate share of the actual costs. Please make a note that some expenditures such as tubing, artificial lift or surface equipment may occur up to one year after the project has been initiated.



Brandon Patrick  
Land Manager  
Novo Oil & Gas Northern Delaware, LLC  
105 N. Hudson Avenue, Suite 500  
Oklahoma City, Oklahoma 73102  
Office: 405-609-1740  
bpatrick@novoog.com

May 8, 2018

WPX Energy, Inc.  
420 S. Main Street  
Tulsa, OK 74103

Attention: Justin Hall

Re: Proposed Working Interest Unit (WIU)  
Rana Salada 6/5 BS/WCP Working Interest Unit

Proposed Wells

Rana Salada Fed Com 1 5 23S 29E WB 1H  
Rana Salada Fed Com 1 5 23S 29E WXY 1H  
Eddy County, NM

Mr. Hall:

Novo Oil & Gas Northern Delaware, LLC ("Novo") as Operator hereby proposes to form a 636.09 acre Working Interest Unit (WIU) covering the N/2 of Section 5 and the N/2 of Section 6, Township 23 South, Range 29 East, Eddy County, NM. for the Wolfcamp and Bone Spring formations, save and except the 2<sup>nd</sup> Bone Spring formation.

Further, in connection with the formation of the Rana Salada 6/5 BS/WCP Working Interest Unit, as described above, Novo hereby proposes the drilling of three (3) horizontal wells as more particularly set forth below. According to public records, WPX Energy, Inc. owns a 314.17 net acre interest in Lots 1, 2, 3, 4, 5, SE/4NW/4 & S/2NE/4 of Section 6, representing a 49.39% working interest in each of the two proposed Wolfcamp wells described below.

Proposed Wells - Rana Salada 6/5 BS/WCP WIU:

Rana Salada Fed Com 1 5 23S 29E WB 1H  
SHL: Lot 1 of Section 1, Township 23 South, Range 28 East.  
BHL: 330' FNL, 330' FEL of Section 5, Township 23 South, Range 29 East.  
The N/2 of Section 6 and the N/2 of Section 5 will be dedicated to the well as its 640 acre project area. The well will be drilled to an approximate true vertical depth (TVD) of 10,675 feet subsurface to evaluate the Wolfcamp "B" formation. The proposed well will have a measured depth (MD) of approximately 21,475 feet.

Proposed WIU and Wells – Rana Salada  
Sections 5 & 6, Township 23 South, Range 29 East  
Eddy County, NM  
Page 2

Proposed Wells - Rana Salada 6/5 BS/WCP WIU (cont.)

Rana Salada Fed Com 1 5 23S 29E WXY 1H

SHL: Lot 1 of Section 1, Township 23 South, Range 28 East.

BHL: 330' FNL, 330' FEL of Section 5, Township 23 South, Range 29 East.

The N/2 of Section 6 and the N/2 of Section 5 will be dedicated to the well as its 640 acre project area. The well will be drilled to an approximate true vertical depth (TVD) of 10,005 feet subsurface to evaluate the Wolfcamp "B" formation. The proposed well will have a measured depth (MD) of approximately 20,805 feet.

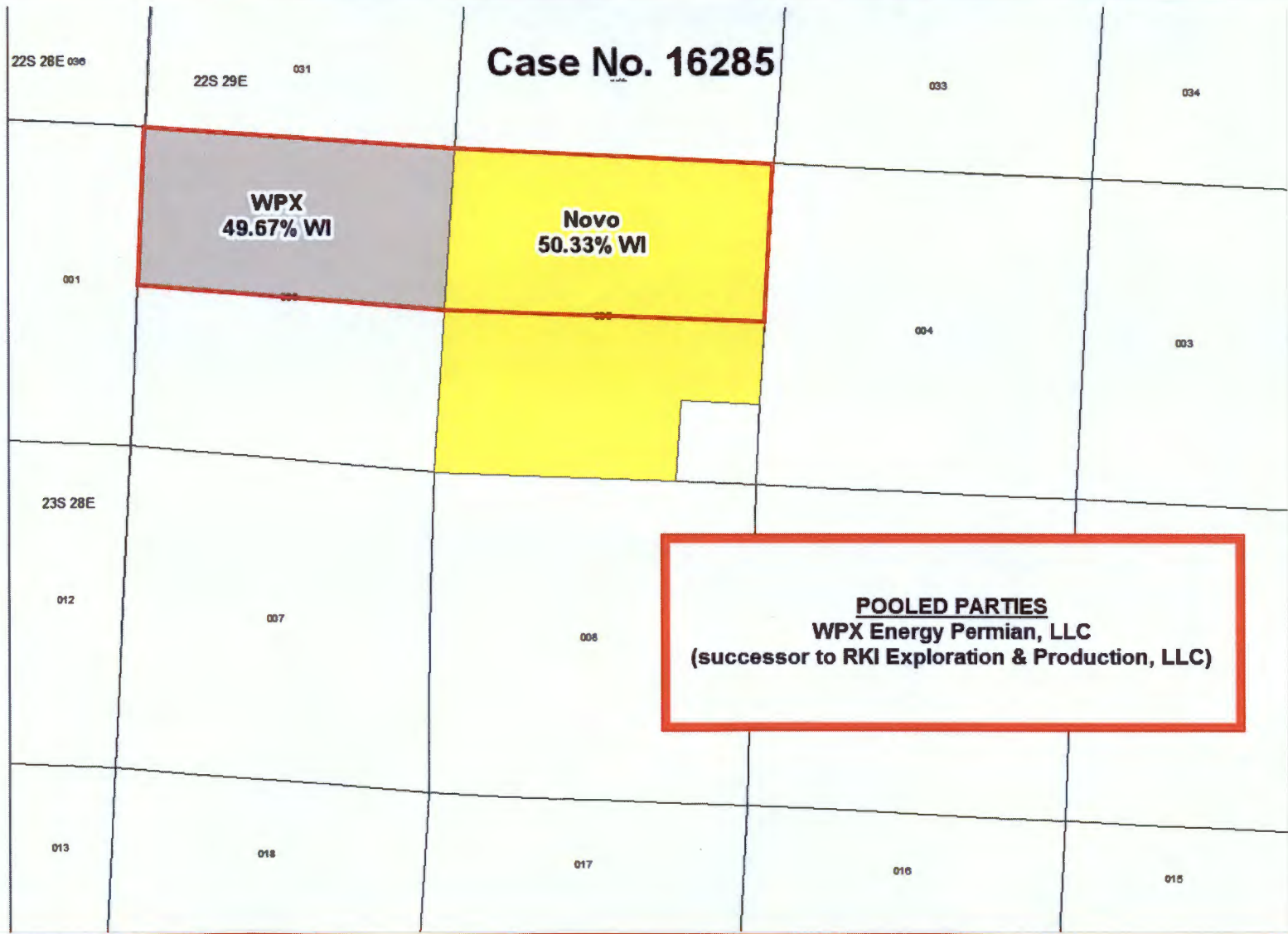
Regarding the above, enclosed for your handling are AFEs for each of the three (3) proposed wells listed above. In the event you elect to participate in the proposed wells, please execute the enclosed AFEs and return to the attention of the undersigned within thirty (30) days from receipt of this letter. Upon receipt of the executed AFEs, Novo will provide you with its proposed Operating Agreement for execution. Should you have any questions regarding the above, please call me at (405) 609-1740 or if by email, my email address is [bpatrick@novoog.com](mailto:bpatrick@novoog.com).

Sincerely,

**Novo Oil & Gas Northern Delaware, LLC**

Brandon Patrick  
Land Manager

# Case No. 16285: Land Plat Showing WI



# Land Plat Showing Surface Plan



This surface plan  
was analyzed and  
approved by the  
BLM at onsites held  
March 2018 and  
November 2017



| List of Pooled Parties - Case No. 16285          |                    |                    |                                                |
|--------------------------------------------------|--------------------|--------------------|------------------------------------------------|
| Owner Name                                       | WI in Project Area | Committed to Unit? | Comment                                        |
| WPX Energy Permian, LLC                          | 49.67%             | No                 | Successor to RKI Exploration & Production, LLC |
| <hr/>                                            |                    |                    |                                                |
| <i>Novo Oil &amp; Gas Northern Delaware, LLC</i> | 50.33%             |                    |                                                |
| TOTAL                                            | 100.00%            |                    |                                                |

Summary of Communication - Case No. 16285

| Party                   | Time Span of Communication | Summary of Correspondence (in chronological order)                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WPX Energy Permian, LLC | 10/2017 - Present          | <p>Novo collaborated to find drill island locations for full development of Sections 5 and 6, 23S-29E;</p> <p>Novo included WPX on conversations with BLM regarding drill islands and Development Area proposals</p> <p>Novo and WPX agreed on a trade where Novo will acquire an undivided 50% WI in the N/2 of Section 6-23S-29E;</p> <p>Novo sent well proposal letters and AFEs to WPX;</p> <p>Novo and WPX are currently negotiating a JOA where Novo will be named as the operator</p> |

**STATE OF NEW MEXICO  
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES  
OIL CONSERVATION DIVISION**

**APPLICATION OF NOVO OIL & GAS, LLC  
FOR A NON-STANDARD SPACING AND PRORATION UNIT  
AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

**CASE NO. 16285**

**AFFIDAVIT OF NOTICE**

COUNTY OF SANTA FE    )  
                                          ) ss.  
STATE OF NEW MEXICO    )

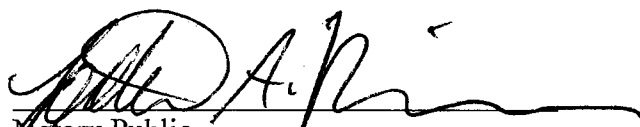
Candace Callahan, being duly sworn upon her oath, deposes and states:

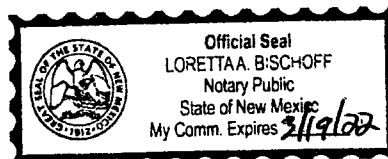
1. I am over the age of 18 and have personal knowledge of the matters stated herein.
2. I am an attorney for Novo Oil & Gas, LLC.
3. Applicant has conducted in good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Form C-108 and Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.

  
\_\_\_\_\_  
Candace Callahan

SUBSCRIBED AND SWORN TO before me this 11<sup>th</sup> day of July, 2018 by Candace Callahan.

My Commission Expires:  
3/19/22

  
\_\_\_\_\_  
Notary Public



**EX 6-16285**

**CERTIFIED MAIL RETURN RECEIPTS**

**CASE NO. 16285**

**(9416.0005)**

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                             |  | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> |  | <p>A. Signature<br/> X <i>Alvin [Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| <p>1. Article Addressed to:</p> <p>Keystone O&amp;G NM, LLC<br/> 201 Main Street, Suite 2700<br/> Fort Worth, TX 76102</p>                                                                                                |  | <p>B. Received by (Printed Name) <i>Alvin</i> C. Date of Delivery <i>JUN 26 2017</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| <p>9416-0005</p>                                                                                                                                                                                                          |  | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/> If YES, enter delivery address below: <input type="checkbox"/> No</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| <p>2. Article Number (Transfer from service label)</p> <p>7017 3380 0000 4382 9326</p>                                                                                                                                    |  | <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®<br/> <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™<br/> <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery<br/> <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise<br/> <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™<br/> <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> |  |



9590 9402 3134 7166 5453 57

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

| U.S. Postal Service™<br>CERTIFIED MAIL® RECEIPT<br>Domestic Mail Only                            |    |
|--------------------------------------------------------------------------------------------------|----|
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®. |    |
| OFFICIAL USE                                                                                     |    |
| Certified Mail Fee \$                                                                            |    |
| Extra Services & Fees (check box, add fee as appropriate)                                        |    |
| <input type="checkbox"/> Return Receipt (hardcopy)                                               | \$ |
| <input type="checkbox"/> Return Receipt (electronic)                                             | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery                                      | \$ |
| <input type="checkbox"/> Adult Signature Required                                                | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery                                     | \$ |
| Postage                                                                                          |    |
| <p>Keystone O&amp;G NM, LLC<br/> 201 Main Street, Suite 2700<br/> Fort Worth, TX 76102</p>       |    |
| <p>9416-0005</p>                                                                                 |    |
| <p>PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p>                |    |

7017 3380 0000 4382 9326

Postmark  
Here

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                             |  | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> |  | <p>A. Signature <u><i>[Signature]</i></u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| <p>1. Article Addressed to:</p> <p>CTV O&amp;G NM, LLC<br/>201 Main Street, Suite 2700<br/>Fort Worth, TX 76102</p>                                                                                                       |  | <p>B. Received by (Printed Name) <u>                    </u> C. Date of Delivery <u>JUN 26 2017</u></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| <p>9416-0005</p>                                                                                                                                                                                                          |  | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below: <u>                    </u></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <p>Barcode: </p> <p>9590 9402 3134 7166 5453 95</p>                                                                                      |  | <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> all Restricted Delivery</p> |  |
| <p>2. Article Number (Transfer from service label)</p> <p>7017 3380 0000 4382 9364</p>                                                                                                                                    |  | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |

Domestic Return Receipt

| U.S. Postal Service™<br>CERTIFIED MAIL® RECEIPT<br>Domestic Mail Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                           |
| OFFICIAL USE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                           |
| <p>Certified Mail Fee \$ <u>                    </u></p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ <u>                    </u></p> <p><input type="checkbox"/> Return Receipt (electronic) \$ <u>                    </u></p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ <u>                    </u></p> <p><input type="checkbox"/> Adult Signature Required \$ <u>                    </u></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ <u>                    </u></p> | <p>Postmark Here</p> <p>9416-0005</p> <p>CTV O&amp;G NM, LLC<br/>201 Main Street, Suite 2700<br/>Fort Worth, TX 76102</p> |
| <p>PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                           |

7017 3380 0000 4382 9364

**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 9416-0005  
  
LMB1 O&G NM, LLC  
201 Main Street, Suite 2700  
Fort Worth, TX 76102



9590 9402 3134 7166 5453 88

2. Article Number (Transfer from service label)  
7017 3380 0000 4382 9357

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent  
*[Signature]* ☐ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
JUN 26 2017  
D. Is delivery address different from Item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☐ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery  
☐ Insured Mail ☐ Mail Restricted Delivery

Domestic Return Receipt

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CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)™

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage  
LMB1 O&G NM, LLC  
201 Main Street, Suite 2700  
Fort Worth, TX 76102

9416-0005

PS Form 3800, April 2015 PSN 7530-02-003-9047

See Reverse for Instructions

7017 3380 0000 4382 9357

| SENDER COMPLETE THIS SECTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                        |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <p>A. Signature<br/>  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> |  |
| <p>1. Article Addressed to:</p> <p>RKI Exploration &amp; Production, LLC<br/>           3500 One Williams Center<br/>           Tulsa, OK 74172</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <p>B. Received by (Printed Name)<br/>           Ashley Nolan</p>                                                                                                                         |  |
| <p>2. Article Number (Transfer from service label)</p> <p>9416-0005</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <p>C. Date of Delivery<br/>           6-25-19</p>                                                                                                                                        |  |
| <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®<br/> <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™<br/> <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery<br/> <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise<br/> <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™<br/> <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> |  | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>           If YES, enter delivery address below:</p>                       |  |
| <p>9590 9402 3134 7166 5454 94</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | <p>05</p>                                                                                                                                                                                |  |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <p>Domestic Return Receipt</p>                                                                                                                                                           |  |

| U.S. Postal Service™<br>CERTIFIED MAIL® RECEIPT<br>Domestic Mail Only                                                                                                                                                                                                                                                                                                                                                                  |                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>                                                                                                                                                                                                                                                                                                                                          |                      |
| OFFICIAL USE                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |
| <p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> | <p>Postmark Here</p> |
| <p>Postage</p> <p>9416-0005</p> <p>RKI Exploration &amp; Production, LLC<br/>           3500 One Williams Center<br/>           Tulsa, OK 74172</p>                                                                                                                                                                                                                                                                                    |                      |
| <p>PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions</p>                                                                                                                                                                                                                                                                                                                                                      |                      |

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

9416-0005

THRU LINE O&G NM, LLC  
201 Main Street, Suite 2700  
Fort Worth, TX 76102



9590 9402 3134 7166 5453 71

2. Article Number (Transfer from service label)

7017 3380 0000 4382 9340

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 25 2017

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

05

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

9416-0005

THRU LINE O&G NM, LLC  
201 Main Street, Suite 2700  
Fort Worth, TX 76102

Postmark  
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7017 3380 0000 4382 9340

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | COMPLETE THIS SECTION FOR DELIVERY                                                                                                                                                  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | <p>A. Signature<br/> <input checked="" type="checkbox"/> <i>Moham</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>                                         |  |
| <p>1. Article Addressed to:</p> <p style="text-align: right;">9416-0005</p> <p>SRB1 O&amp;G NM, LLC<br/>           201 Main Street, Suite 2700<br/>           Fort Worth, TX 76102</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <p>B. Received by (Printed Name) <i>JUN 25 2017</i> Date of Delivery</p>                                                                                                            |  |
| <p>2. Article Number (Transfer from service label)</p> <p>9590 9402 3134 7166 5453 64</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>           If YES, enter delivery address below:</p> <p><i>05</i></p> |  |
| <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> |  |                                                                                                                                                                                     |  |
| <p>7017 3380 0000 4382 9333</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                     |  |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9063</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <p>Domestic Return Receipt</p>                                                                                                                                                      |  |

| U.S. Postal Service™<br>CERTIFIED MAIL® RECEIPT<br>Domestic Mail Only                                                                                                                                                                                                                                                                                                                                                                  |                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| <p>For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a></p>                                                                                                                                                                                                                                                                                                                                   |                      |
| <p><b>OFFICIAL USE</b></p>                                                                                                                                                                                                                                                                                                                                                                                                             |                      |
| <p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> | <p>Postmark Here</p> |
| <p>Postage \$</p> <p>SRB1 O&amp;G NM, LLC<br/>           201 Main Street, Suite 2700<br/>           Fort Worth, TX 76102</p>                                                                                                                                                                                                                                                                                                           | <p>9416-0005</p>     |
| <p>PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p>                                                                                                                                                                                                                                                                                                                                                      |                      |

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 9416-0005

McCully-Chapman, Inc.  
P. O. Box 1389  
Sealy, TX 77474-8502



9590 9402 3134 7166 5454 18

2. Article Number (Transfer from service label)

7017 3380 0000 4382 9388

PS Form 3811, July 2015 PSN 7530-02-000-9063

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Lois Keneel*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Lois Keneel*

C. Date of Delivery

*6/25*

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

*05*

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail®

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
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For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postage

Postmark  
Here

9416-0005

McCully-Chapman, Inc.  
P. O. Box 1389  
Sealy, TX 77474-8502

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7017 3380 0000 4382 9388

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 9416-0005

XTO Energy, Inc.  
810 Houston Street, WTW 1912  
Fort Worth, Texas 76102  
Attention: Kenneth Hilger



9590 9402 3134 7166 5454 32

2. Article Number (Transfer from service label)

7017 3380 0000 4382 9401

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]*

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

JUN 25 2018

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

05

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail Restricted Delivery

- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)™.

**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

9416-0005

XTO Energy, Inc.  
810 Houston Street, WTW 1912  
Fort Worth, Texas 76102  
Attention: Kenneth Hilger

Postmark  
Here

PS Form 3800, April 2015 PSN 7530-02-000-1047

See Reverse for Instructions

7017 3380 0000 4382 9401

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

9416-0005

COG Operating LLC  
550 W. Texas Avenue  
Midland, TX 79702



9590 9402 3134 7166 5454 25

2. Article Number (Transfer from service label)

7017 3380 0000 4382 9395

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

05

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail®

☐ Insured Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage

9416-0005

COG Operating LLC  
550 W. Texas Avenue  
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053

See Reverse for Instructions

7017 3380 0000 4382 9395

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 9416-0005

EOG Y Resources, Inc.  
5509 Champions Drive  
Midland, Texas 79706  
Attention: Charles Moran



9590 9402 3134 7166 5454 87

2. Article Number (Transfer from service label)

7017 3380 0000 4382 9456

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Robert Foree*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

*R. Foree*

C. Date of Delivery

*6-26-18*

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail®
- ☐ Insured Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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**OFFICIAL USE**

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) \$
  - ☐ Return Receipt (electronic) \$
  - ☐ Certified Mail Restricted Delivery \$
  - ☐ Adult Signature Required \$
  - ☐ Adult Signature Restricted Delivery \$

Postage

9416-0005

EOG Y Resources, Inc.  
5509 Champions Drive  
Midland, Texas 79706  
Attention: Charles Moran

Postmark  
Here

PS Form 3800, April 2015 PSN 7530-02-000-9053

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

9416-0005

EOG M Resources, Inc.  
5509 Champions Drive  
Midland, Texas 79706  
Attention: Charles Moran



9590 9402 3134 7166 5454 63

2. Article Number (Transfer from service label)

7017 3380 0000 4382 9432

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Robert J. Felle* ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*R. Felle*

C. Date of Delivery

*6-26-18*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

All

Mail Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

(PSN 7530-02-000-9053)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Postmark  
Here

9416-0005

EOG M Resources, Inc.  
5509 Champions Drive  
Midland, Texas 79706  
Attention: Charles Moran

PS Form 3800, April 2015 PSN 7530-02-000-3017

See Reverse for Instructions

7017 3380 0000 4382 9432

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: <span style="float: right;">9416-0005</span></p> <p style="margin-left: 40px;">           OXY Y-1 Company<br/>           P. O. Box 27570<br/>           Houston, TX 77227<br/>           Attention: Jeremy Murphrey         </p> <div style="text-align: center; margin-top: 20px;"> <br/>           9590 9402 3134 7166 5454 56         </div> <p>2. Article Number (Transfer from service label)</p> <p style="text-align: center; font-size: 1.2em;">7017 3380 0000 4382 9425</p> | <p>A. Signature</p> <p style="text-align: center; font-size: 1.5em; font-family: cursive;">X</p> <p style="text-align: right;"><input type="checkbox"/> Agent<br/><input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p style="text-align: center; font-size: 1.2em; font-family: cursive;">James E. Board</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/>If YES, enter delivery address below <input type="checkbox"/> No</p> <p style="text-align: center; font-size: 1.5em; font-family: cursive;">05</p> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <div style="width: 45%;"> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p style="text-align: center;">All Mail Restricted Delivery (over \$500)</p> </div> <div style="width: 45%;"> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p> </div> </div> |

PS Form 3811, July 2015 PSN 7530-02-000-9053
Domestic Return Receipt

5242 283 0000 4382 9425

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OFFICIAL USE

|                                                              |    |
|--------------------------------------------------------------|----|
| Certified Mail Fee<br>\$                                     |    |
| Extra Services & Fees (check box, add fee as appropriate)    |    |
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ |
| <input type="checkbox"/> Adult Signature Required            | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |
| Postage                                                      |    |

Postmark Here

9416-0005

OXY Y-1 Company

P. O. Box 27570

Houston, TX 77227

Attention: Jeremy Murphrey

PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions

# USPS Tracking®

FAQs > (<http://faq.usps.com/?articleId=220900>)

Track Another Package +

Tracking Number: 70173380000043829449

Remove X

Your item was picked up at a postal facility at 7:35 am on June 26, 2018 in MIDLAND, TX 79701.

## ✓ Delivered

June 26, 2018 at 7:35 am  
Delivered, Individual Picked Up at Postal Facility  
MIDLAND, TX 79701

Get Updates ✓

Text & Email Updates

Tracking History

Product Information

| U.S. Postal Service™<br>CERTIFIED MAIL® RECEIPT<br>Domestic Mail Only                             |           |
|---------------------------------------------------------------------------------------------------|-----------|
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.  |           |
| OFFICIAL USE                                                                                      |           |
| Certified Mail Fee \$                                                                             |           |
| Extra Services & Fees (check box, add fee as appropriate)                                         |           |
| <input type="checkbox"/> Return Receipt (hardcopy)                                                | \$        |
| <input type="checkbox"/> Return Receipt (electronic)                                              | \$        |
| <input type="checkbox"/> Certified Mail Restricted Delivery                                       | \$        |
| <input type="checkbox"/> Adult Signature Required                                                 | \$        |
| <input type="checkbox"/> Adult Signature Restricted Delivery                                      | \$        |
| Postage                                                                                           | 9416-0005 |
| EOG A Resources, Inc.<br>5509 Champions Drive<br>Midland, Texas 79706<br>Attention: Charles Moran |           |
| PS Form 3800, April 2015 PSN 7530-01-000-9047 See Reverse for Instructions                        |           |

See Less ^

## Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

FAQs (<http://faq.usps.com/?articleId=220900>)

CERTIFIED MAIL



7037 3380 0000 4382 9373

**BIENSTAYE WIDZINIAK, P.C.**  
ATTORNEYS AT LAW  
21655 Greenwood St., Suite 1100  
Denver, CO 80202-5015

POSTAGE  
06/21/2018  
US POSTAGE  
\$07.41

ZIP 80202  
0611124436

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**OFFICIAL USE**

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage

9416-0005

Wade Petroleum Corporation  
2406 Northwood Ct. NW  
Albuquerque, NM 87107

Postmark  
Here

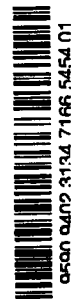
7037 3380 0000 4382 9373

Wade Petroleum Corporation  
9416-0005  
971075015-1N  
06/29/18

RETURN TO SENDER  
UNABLE TO FORWARD  
RETURN TO SENDER



|                                                                                                                                                                                                                                                                                                                                                                        |  |                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------|
| <b>1. Article Addressed to:</b><br>Wade Petroleum Corporation<br>2406 Northwood Ct. NW<br>Albuquerque, NM 87107                                                                                                                                                                                                                                                        |  | 9416-0005                  |
| <b>2. Service Type</b><br><input checked="" type="checkbox"/> Certified Mail<br><input type="checkbox"/> Certified Mail Restricted Delivery<br><input type="checkbox"/> Priority Mail Express®<br><input type="checkbox"/> Registered Mail™<br><input type="checkbox"/> Registered Mail Restricted Delivery<br><input type="checkbox"/> Return Receipt for Merchandise |  |                            |
| <b>3. Signature</b><br><input checked="" type="checkbox"/> Agent<br><input type="checkbox"/> Addressee                                                                                                                                                                                                                                                                 |  |                            |
| <b>B. Received by (Printed Name)</b>                                                                                                                                                                                                                                                                                                                                   |  | <b>C. Date of Delivery</b> |
| <b>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</b><br>If YES, enter delivery address below:                                                                                                                                                                                                      |  |                            |



0601 0472 3134 7166 5454 01





# Case: 16285

## Exhibit:



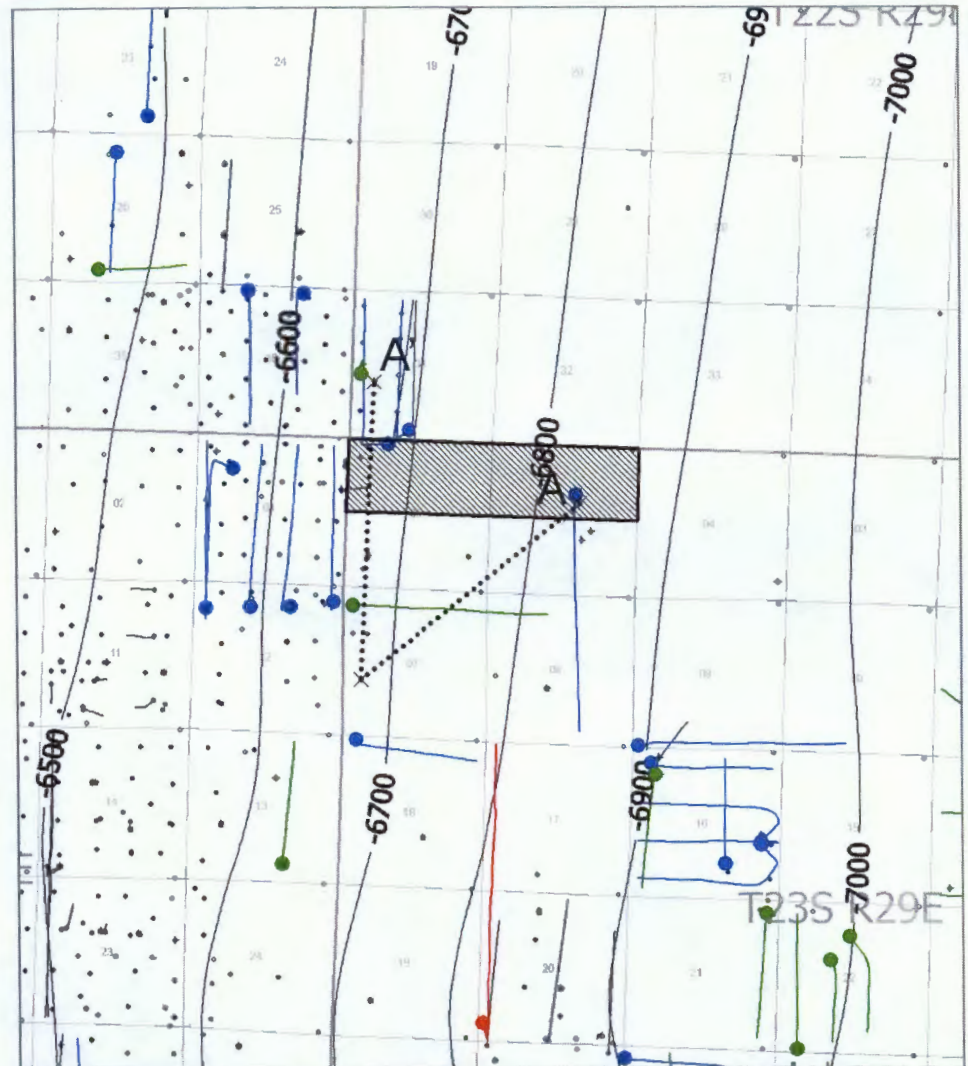
- Wolfcamp Subsea Structure
- C.I. = 100'

 Project Area

 Wolfcamp Producer

 Bone Spring Producer

 Delaware Producer



# Case: 16285

## Exhibit:



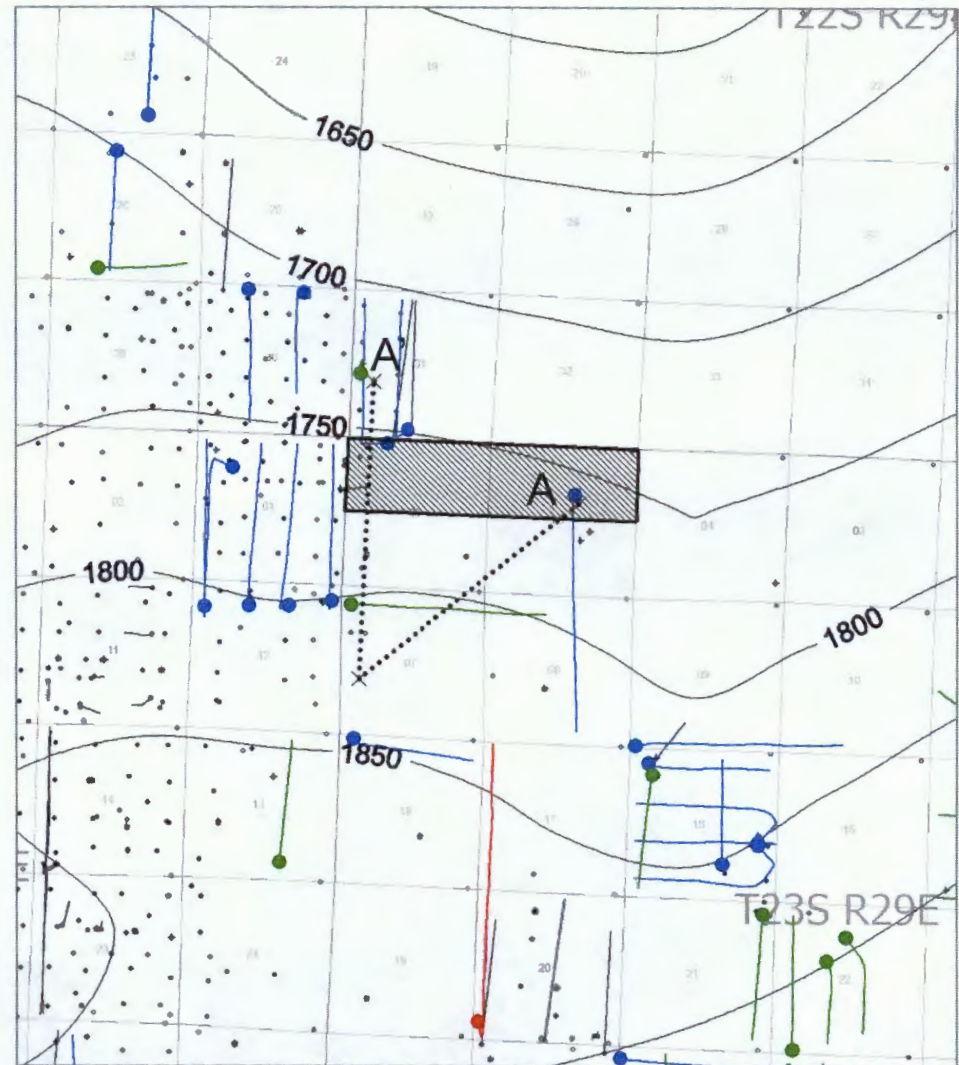
- Wolfcamp Isochore
- C.I. = 50'

 Project Area

 Wolfcamp Producer

 Bone Spring Producer

 Delaware Producer



# Case: 16285

## Exhibit:



- Stratigraphic Cross-Section A – A'
- Approximate Target Zones Shown by Red Arrows

