District I 1625 N. French Dr., Hobbs, NM 88240 Phone: (57\$) 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

320

¹ API Number

State of New Mexico

MAR 17 2014

³ Pool Name

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Form C-102 Revised August 1, 2011

Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION DI VISION DIVISION DI VISION DIVISION DI VISION DI VISIONI DI VISIO

District Office

1220 South St. Francis Dr. Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

Pool Code

30-015-26317		85305			SHUGART, NORTH (STRAWN)					
⁴ Property Code		⁵ Property Name							6 Well Number	
302808				1						
OGRID No.				⁹ Elevation						
240974				3673'						
					• Surface	Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
Ċ	16	18S	31E		660'	NORTH	1980'	WEST	EDDY	
		,	" Bo	ttom Hol	e Location If	Different From	m Surface		<u>-</u>	
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
² Dedicated Acre	¹³ Joint o	r Infill 14 C	onsolidation	Code 15 Or	der 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.

1980`.	-C09-0		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.
		·	O3/12/14 Signature Date CRAIG SPARKMAN Printed Name E-mail Address
			SURVEYOR CERTIFICATION* I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. **Date of Survey
			Signature and Seal of Professional Surveyor: Certificate Number