District 1
1625 N. French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax: (575) 393-0720
District II
811 5 First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Azzec, 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

¹API Number

30-015-35776

Property Code

36716

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

Pool Name

Wildcat G-04 S252501H; Bone Spring

X AMENDED REPORT:

Well Number

WELL LOCATION AND ACREAGE DEDICATION PLAT

5 Property Name

Hot Seat Federal

Pool Code

97841

⁷ OGRID №. 229137		Operating LLC									⁹ Elevation		
											3594'		
	-				" Surfa	ice	Location						
UL or fot no.	Section	ction Township Range		Lot Idn	Lot Idn Feet from		he North/South line		Feet from the	East/West line		County	
A	. 35	24S 25E		·	990	ŀ	North		660	East		Eddy	
	<u> </u>		. "Bo	ttom Ho	le Locatio	n I	f Different I	rom	Surface		····		
UL or lot no.	Section	Township		Lot fda		***************************************	~ 		Feet from the	East/West line		County	
	ł	•								******		Contro	
12 Dedicated Acre	s ¹⁾ Joint o	r Infill	11 Consolidation	Cede 15 O	l rder No.		L					·	
40									•				
livision.	will be ass	signed to	this complet	ion until a	ll interests h	ave	been consolid	ated or	r a non-standard	unit has t	een appro	ved by the	
16							990'		I hereby certify that to the best of my bi owns a working in , the proposed bottom	si the information would ge and bu teress or unlease on hole location	on contained here elief, and that the ed mineral intere e or has a right to	CATION in is true and comple s organization either st in the land include idn't this well ut this well a nuneral or work	
						,	0-	660	— <u>i</u> L	innan), lexytuk	ugivenieni or a i	ompulsory puoling	
2.			A SANCE OF THE PARTY OF THE PAR			.			Max Signature	z Pe	LAS.	1/23/ Date	
					•			٠	Mayte Printed Name		***************************************		
· 							-		mreyes1@ E-mail Address	eoncho.	com		
									I hereby certify plat was plotte made by me of same is true at	y that the w ed from field under my .	ell location . d notes of ac supervision,	shown on this tual surveys and that the	
							and the second and th		Date of Survey		o me vesi oj		
							,		Signature and Sec	al of Professio	onal Surveyor:		
									REFI	ER TO O	RIGINAL	PLAT	
,									Certificate Number	,			