

MAR 0 1 2017

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Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico

Form C-102

Energy, Minerals & Natural Resources Department RECEIVED in one copy to appropriate OIL CONSERVATION DIVISION

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

AMENDED REPORT

District Office

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-15-37496	1 00000 10 10 10 14-16			
<sup>4</sup> Property Code 37991	Jum	<sup>4</sup> Property Name nping Spring 16 State Com	Well Number	
<sup>7</sup> OGRIÐ No. 162683	*Operator Name Cimarex Energy Co. of Colorado		<sup>2</sup> Elevation 3390'	

Surface Location UL or lot no. Section Township Range Lot Idn Feet from the North/South line Feet from the East/West line County 16 **26S** 26E 990' North 660' East Eddy "Bottom Hole Location If Different From Surface UL or lot no. Section Township Range Feet from the North/South line Feet from the East/West line County 875 660' West **26S** North Eddy D 16 26E <sup>15</sup> Order No. 12 Dedicated Acres <sup>13</sup> Joint or Infill Consolidation Code P 320

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.

division.				
BHL ,228		TO THE THE STEE AND SEE AND SEE AND SEE AND SEE AND SEE	SHL	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 whereal 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 computatory pooling order hereiofice entered by the driftion.  2/27/2017  Signature  Armithy Crawford  Printed Name  a crawford @ cimarex.com  B-mail Address
	Miles Silver Silver Silver	ang anna Welle When anns w		**SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by the 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

