

DISTRICT I
1629 N. FRENCH DR., HOBBES, NM 88240
Phone: (576) 898-6161 Fax: (576) 898-0720

DISTRICT II
811 S. FIRST ST., ARTESIA, NM 88210
Phone: (576) 748-1283 Fax: (576) 748-0780

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (506) 834-6178 Fax: (506) 834-6170

DISTRICT IV
1880 S. ST. FRANCIS DR., SANTA FE, NM 87508
Phone: (505) 476-3480 Fax: (505) 476-3488

State of New Mexico **NM OIL CONSERVATION**
Energy, Minerals & Natural Resources Department **ARTESIA DISTRICT**
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

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

RECEIVED
AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

As Drilled

API Number 30-015-44962	Pool Code 98199	Pool Name PARKWAY; BONE SPRING, WEST
Property Code 321420	Property Name CORAL PWU 28-27	Well Number 62H
OGRID No. 6137	Operator Name DEVON ENERGY PRODUCTION COMPANY, L.P.	Elevation 3300.5'

Surface Location

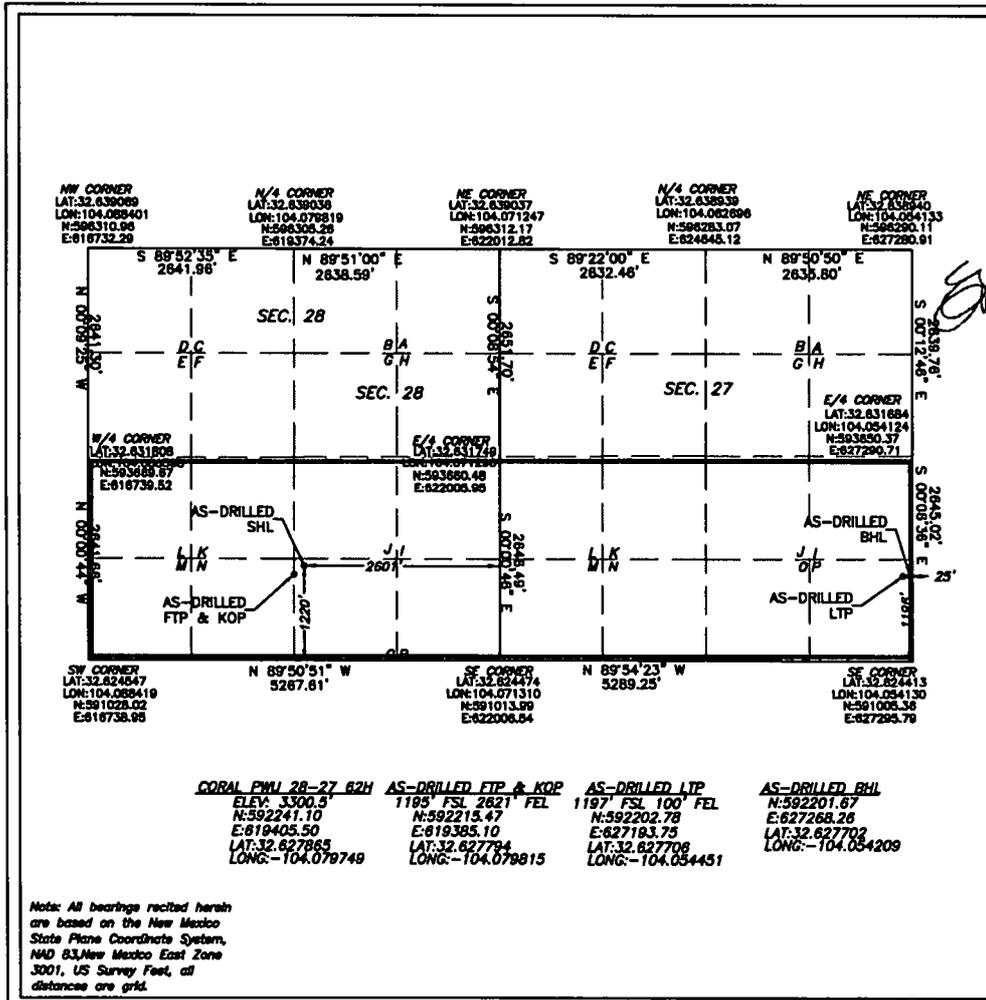
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	28	19-S	29-E		1220	SOUTH	2601	EAST	EDDY

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
P	27	19-S	29-E		1196	SOUTH	25	EAST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	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



OPERATOR CERTIFICATION
I hereby certify that the information 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 mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: Erin Workman Date: 02/04/2019
Printed Name: Erin Workman
E-mail Address: Erin.workman@dvn.com

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: 06/2018
Signature & Seal of Professional Surveyor: B. L. LAMAN
Certificate No. 22404 B.L. LAMAN
W.O. # _____ DRAWN BY: CM