· · ·,							RECE	MED			
District I 1625 N. French Dr., Hobbs, NM 88240				State of New Mexico						Form C-102	
1625 N. French Dr., Hobbs Phone: (575) 393-6161 Fa <u>District II</u> 811 S. First St., Artesia, N. Phone: (575) 748-1283 Fa: <u>District III</u> 1000 Rio Brazos Road, Az Phone: (505) 334-6178 Fa: <u>District IV</u> 1220 S. St. Francis Dr., Sa Phone: (505) 476-3460 Fa:	3-0720 3-9720 410 4-6170 87505	Enerş	Energy, Minerals & Natural Resources Department 1 6 2019 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. DISTRICTI-ARTESIAO.C Santa Fe, NM 87505						ed August 1, 2011 copy to appropriate District Office ENDED REPORT back & add		
WELL LOCATION AND ACREAGE DEDICATION PLAT Strawn)											
¹ API Number 30-015-33282				² Pool Code ³ Pool Nam 96412 CULEBRA BLUFI							
⁴ Property Code 322828			⁵ Property Name APOLLO FEE					⁶ Well Number			
⁷ OGRID No. 372920 N		N	⁸ Operator Name OVO OIL & GAS NORTHERN DELAWARE, LLC						⁹ Elevation 3011'		
¹⁹ Surface Location											
UL or lot no. M	Section 4	Township 23 S	^{Range} 28 E	Lot Idn	Feet from the 660	North/South line	Feet from the 660		t/West line /EST	County 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	Eas	t/West line	County	
¹² Dedicated Acres 320	¹³ Joint o		onsolidation	Code ¹⁵ Or	der No.				l		

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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.

16			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 he <u>reterion</u> e entered by the division.
			Surce 7-10-19
			Signature Date
			BRIAN WOOD
			Printed Name
			brian@permitswest.com
			E-mail Address
			(505) 466-8120
	· · · · · · · · · · · · · · · · · · ·	Ì	*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.
			2-25-04
			Date of Survey
			Signature and Seal of Professional Surveyor:
660'			Original survey by
			Original survey by
$\rightarrow 0$			Gary L. Jones #7977
			is attached.
660			Certificate Number
660'			

Rup 7-16-19