1625 N. French Dr., Hobbs, NM 88240 District II 210 1301 W. Gra District III 1000 Rio Brazo District IV

State of New Mexico

Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION RECEIVED

Form C-102 Revised October 12, 2005 nit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

☐ AMENDED REPORT

1220 South St. Francis Oct - ARTESIA Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 875

			WELL LC	CATIO	N AND ACR	EAGE DEDIC	<u>ation pla</u>	T		
¹ A			² Pool Code		³ Pool Name					
30-005-			WILDCAT, WOLFCAMP							
*Property Code					'Well Number					
35842			ALYSHI	EBA 142	11					
OGRID No.			' Elevation							
230387		PARALLEL PETROLEUM CORPORATION							GR 3414	
					10 Surface 1	Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line		County
D	34	148	26E		760	NORTH	300	WEST		CHAVEZ
			11 Bc	ottom Ho	le Location If	Different Fron	n Surface			
UL or lot no.		Township		Lot Idn	Feet from the	North/South line	Feet from the	East	t/West line	County
D	34	14S	26E		740	NORTH	976	EAS'	г	CHAVEZ
Dedicated Acres 320	" Joint or	Infill	*Consolidation	Code "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.

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16 LSL PP 300 /480		976 BHL 976	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 f 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
	_		Signature Date KAYE MC CORMICK Printed Name
			¹⁸ 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