

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

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 July 16, 2010
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-37636		² Pool Code 96403 30216		³ Pool Name Hay Hollow Wildcat, Bone Spring	
⁴ Property Code 308296		⁵ Property Name Moody 17 Fee Com			⁶ Well Number 3H
⁷ OGRID No. 229137		⁸ Operator Name COG Operating LLC			⁹ Elevation 3038'

¹⁰ Surface Location

UL or lot no. M	Section 17	Township 25S	Range 28E	Lot Idn	Feet from the 660	North/South line South	Feet from the 330	East/West line West	County Eddy
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no. D	Section 17	Township 25S	Range 28E	Lot Idn	Feet from the 142	North/South line North	Feet from the 339	East/West line West	County Eddy
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¹² Dedicated Acres 160	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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.

				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 heretofore entered by the division. Signature Date 3/15/11
				Stormi Davis Printed Name sdavis@conchoresources.com E-mail Address
				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:
				REFER TO ORIGINAL PLAT Certificate Number

RECEIVED
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NMOCD ARTESIA