State of New Mexico Form C-102 District I Energy, Minerals & Natural Resolutes CEIVED Revised October 12, 2005 1625 N French Dr, Hobbs, NM 88240 District II OIL CONSERVATION DIVISION PR 24 2512 mut to Appropriate District Office 1301 W. Grand Avenue, Artesia, NM 88210 State Lease - 4 Copies District III 1220 South St. Francis Dr. NMOCD ARTESIA 1000 Rio Brazos Rd, Aztec, NM 87410 Fee Lease - 3 Copies District IV X AMENDED REPORT 1220 S. St. Francis Dr., Santa Fe, NM 87505 WELL LOCATION AND ACREAGE DEDICATION PLAT ¹ API Number ² Pool Code ³ Pool Name 30-015-38542 53815 Sand Dunes Delaware, West ⁴ Property Code ⁵ Property Name 6 Well Number 304928 Pure Gold B Federal 13 7OGRID No. 8 Operator Name 9 Elevation 3336' GR 16696 OXY USA Inc ¹⁰Surface Location UL or lot no. Lot, Idn Feet from the North/South line Feet from the East/West line Section Township Range County K 235 31E 20 2360 west Eddy 1550 11 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 M 235 South 31E 521 757 west 13 Joint or Infill 15 Order No. 12 Dedicated Acres 14 Consolidation Code 640 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 PROJECT - AREA ¹⁷OPERATOR 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 0 ١٩ 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 David Stewart 821 Printed Name Regulatory Advisor lavid stewart@oxv.com 18SURVEYOR CERTIFICATION

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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

Signature and Seal of Professional Surveyer

Date of Survey

Certificate Number

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