

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
11885 S. ST. FRANCIS DR., SANTA FE, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
11885 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number 30-015-38236	Pool Code 97650	Pool Name Williams Sink; Bone Spirng
Property Code	Property Name LIZARD POT FEDERAL COM	Well Number 4 H
OGRID No.	Operator Name MARBOB ENERGY CORPORATION	Elevation 3500'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	36	19-S	31-E		1650	SOUTH	750	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	1	20-S	31-E		330	SOUTH	660	EAST	EDDY

Dedicated Acres 159.84	Joint or Infill	Consolidation Code	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

<p>GEODETIC COORDINATES NAD 27 NME</p> <p>SURFACE LOCATION Y=587517.3 N X=659269.5 E</p> <p>LAT.=32.614124° N LONG.=103.816078° W</p> <p>BOTTOM HOLE LOCATION Y=580919.6 N X=659392.4 E</p>	<p>36</p> <p>T19S</p> <p>T20S</p> <p>LOT 4</p> <p>LOT 3</p> <p>LOT 2</p> <p>LOT 1</p> <p>S.L. 750'</p> <p>B.H. 660'</p> <p>GRID. AZ = 178°55'52"</p> <p>HORZ. DIST. = 6600.5'</p> <p>SCALE: 1"=2000'</p>	<p>OPERATOR CERTIFICATION</p> <p>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.</p> <p><i>Melanie J Parker</i> 8/15/12 Signature Date Melanie J Parker Printed Name</p> <p>SURVEYOR CERTIFICATION</p> <p>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.</p> <p>MAILED J. EIDSON 25, 2010 Date Surveyed Signature & Seal of Professional Surveyor <i>Ronald J. Eidson</i> 6/24/2010 Certificate No. GARY G. EIDSON 12641 RONALD J. EIDSON 3239</p>
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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT **OCD Artesia**

FORM APPROVED
OMB No 1004- 0137
Expires July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1 Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5 Lease Serial No NMNM057239
2 Name of Operator COG Operating LLC		6 If Indian, Allottee, or Tribe Name
3a Address 2208 W. Main Street Artesia, NM 88210	3b Phone No (include area code) 575-748-6940	7 If Unit or CA Agreement Name and/or No
4 Location of Well (Footage, Sec, T, R, M, or Survey Description) 1650 FSL & 1650 FEL Section 36-T19S-R31E SESW		8 Well Name and No Lizard Pot Federal Com #4 H
Lat. Long.		9 API Well No 30-015-38236
		10 Field and Pool, or Exploratory Area Williams Sink; Bone Spring
		11 County or Parish, State Eddy NM

12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Project Area</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input type="checkbox"/> Water Disposal	

13 Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

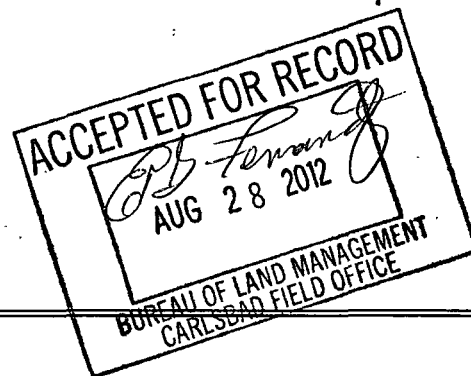
Please see C-102 showing revised project area.

Conditions of Approval

Well will not require "Com" in the well name. Submit a Sundry to drop "Com" from the Well name.
Also open perforations are to be orthodox with-in the project area.

**SUBJECT TO LIKE
APPROVAL BY STATE**

Accepted for record
NMOCD TCS
8/31/2012



14 I hereby certify that the foregoing is true and correct

Name (Printed/ Typed)

Mayte Reyes

Title

Regulatory Analyst

Signature

Date

8/16/12

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 USC Section 1001 AND Title 43 USC Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)