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APR 25 2019

Form C-102

Revised August 1, 2011

District Office

District Office

AMENDED REPORT

District I
1623 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-45630	Pool Code 50371	Pool Name Vivace Crossing; Bone Spring
Property Code 323065	Property Name HEIGHT CC "6-7" FEDERAL COM	Well Number 311H
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 2957.7'

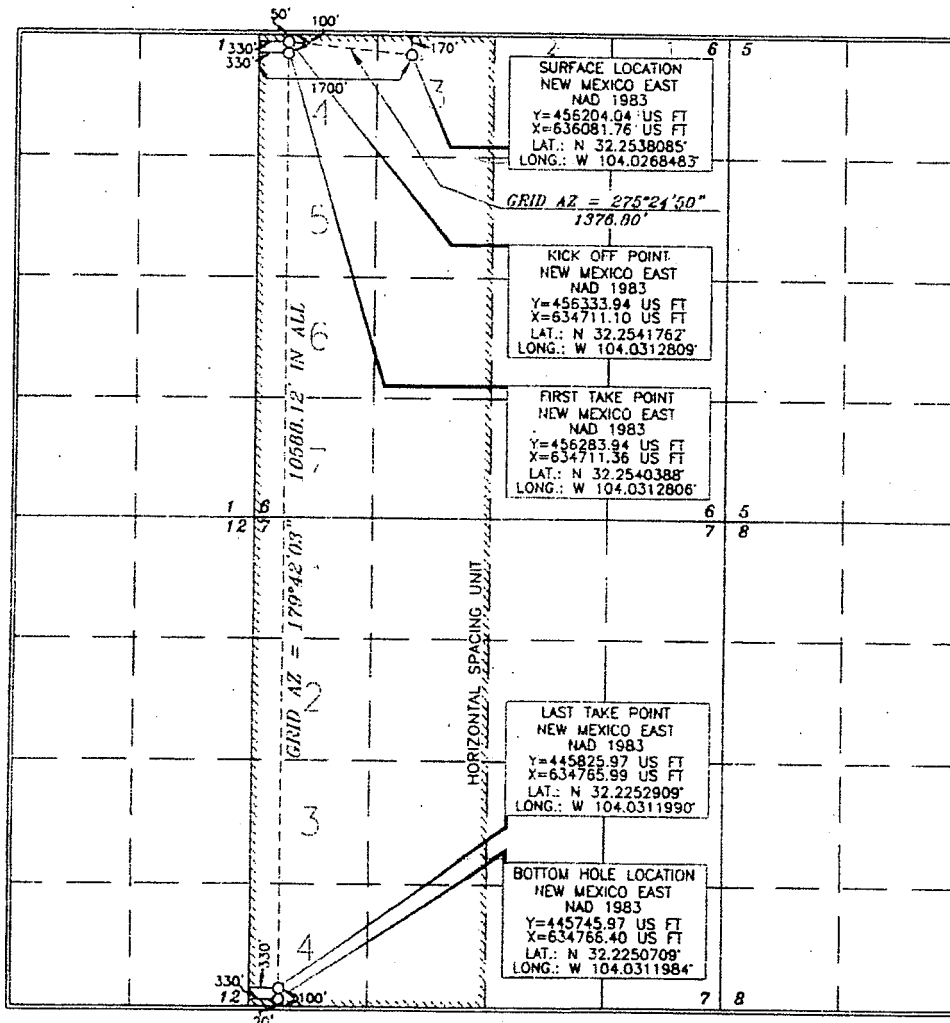
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
3	6	24 SOUTH	29 EAST, N.M.P.M.		170'	NORTH	1700'	WEST	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
4	7	24 SOUTH	29 EAST, N.M.P.M.		20'	SOUTH	330'	WEST	EDDY
Dedicated Acres 640	Joint or Infill	Consolidation Code	Order 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.



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 undivided 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 is a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Sarah Chapman 4/15/19
Signature Date

Sarah Chapman
Printed Name

sarah_chapman@oxy.com
Email Address

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 26-2018
15079

Date of Survey
Signature and Seal of Professional Surveyor

Terry Alack 4/15/2019
Certificate Number 15079