

Division I

1015 S. Francis Dr., Hobbs, NM 88240  
Phone (505) 398-6161 Fax (505) 398-6171

Division II

1000 N. Grand Ave., Santa Fe, NM 87501  
Phone (505) 743-2111 Fax (505) 743-6700

Division III

1000 Pecos Blvd., Santa Fe, NM 87501  
Phone (505) 743-6111 Fax (505) 743-6112

Division IV

1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone (505) 476-3447 Fax (505) 476-3440

State of New Mexico

Energy, Minerals and Natural Resources

Oil Conservation Division

1220 S. St Francis Dr.

Santa Fe, NM 87505

Form O-100  
Rev. 10/2001

**HOBBS OCD**

**AUG 17 2011**

**RECEIVED**

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. Well Number 97875	2. Field Name WILDCAT BONE SPRING
4. Property Code 18378	5. Property Name CAMEL STATE
7. Owner Code 18387	8. Owner Name MACK ENERGY CORP
9. Well ID 101	10. Elevation 3757

10. Surface Location

UL - Lot P	Section 11	Township 13N	Range 16E	Loc. ID#	Feet From SSC	N-S Line S	Feet From SSC	E-W Line E	County LEA
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11. Bottom Hole Location If Different From Surface

UL - Lot	Section	Township	Range	Loc. ID#	Feet From	N-S Line	Feet From	E-W Line	County
12. Dedicated Acres 0.0000	13. Unit or Well	14. Consolidation Code	15. 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 the 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 the 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.

E-Signed By: Terry Shenell  
Title: Production Clerk  
Date: 4/8/2011

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual survey made by me or under my supervision and that the same is true and correct to the best of my belief.

Surveyed By: Ronald Eldon  
Date of Survey: 4/6/2011  
Certificate Number: 3235

AUG 17 2011

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REFERENCE SHEET FOR  
UNDESIGNATED WELLS

	Fm	Pm	N	Pc
17-21 C	XX	XX	XX	

paragraph

1. Date:	8/16/2011
2. Type of Well:	
Oil:	XX Gas:
3. County:	LEA

4. Operator:	MACK ENERGY CORP	APT NUMBER	30 - 025 - 40110
5. Address of Operator	PO BOX 960 ARTESIA NM 88210		
6. Lease name or Unit Agreement Name	>> CAMEL STATE	7. Well Number	# - 1
8. Well Location	Unit Letter P 330 feet from the S line and 330 feet from the E line Section 10 Township 19S Range 36E		

9. Completion Date	8/2/2011	11. Perfs	Top 7607 Bottom 7899	ID 9020
10. Name of Producing Formation(s)		12. Open Hole Casing shoe	Bottom	PBTD 8968

13. C-123 Filed	Date	15. Name of Pool Requested or temporary Wildcat designation	Pool ID num
Y N XX		WILDCAT G-04 S193610P;BONE SPRING	97875
16. Remarks	NEW POOL		

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
NEW POOL	ARKANSAS JUNCTION;BONE SPRING, SOUTH	97875
T 19 S, R 36 E Sec 10: SE/4		

19. Advertised for HEARING.	20. Case Number
21. Name of pool for which was advertised	Pool ID num
ARKANSAS JUNCTION;BONE SPRING, SOUTH	97875
22. Placed in Pool	23. By order number R- May 2005--UDS-NP-ARK30060-1

AUG 17 2011