District I
1625 N French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax (575) 393-0720
District II

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

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

HOBBS OCD OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

<u>District IV</u> 1220 S St Francis Dr , Santa Fe, NM 87505 Phone (505) 476-3460 Fax (505) 476-3462

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ AP1 Number 30-025-40193				² Pool Cod 41440	e /	³ Pool Name Lusk; Bone Spring					
⁴ Property Code		⁵ Property Name							⁶ Well Number		
308161				25H							
⁷ OGRID №.				⁹ Elevation							
229137 .				3576' GR							
¹⁰ Surface Location											
UL or lot no.	Section	Townshi	ip Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County		
E	20	198	32E		1800	North	330	West	Lea		
11 Bottom Hole Location If Different From Surface											
UL or lot no.	Section	Townshi	ip Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County		
Н	20	19S	32E		1806	North	.341	Wastast	Lea		
12 Dedicated Acres 13 Joint or		r Infill	Infill 14 Consolidation Code 15 C		rder No.		4450	-			
160							r				

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.

16	,0081		, 908 J.	OPERATOR CERTIFICATION I hereby certify that the information contained herem 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
	* * * * * * * * * * * * * * * * * * *		B.H. 34	Stgnature Date Stormi Davis Printed Name
		Company of the Compan		Sdavis@concho.com E-mail Address
				18SURVEYOR 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