

District I
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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

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

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-3698	² Pool Code 97947	³ Pool Name WC-025 G-09 52634266 BONE SPRING
⁴ Property Code 34380	⁵ Property Name RATTLESNAKE FEDERAL UNIT	
⁷ OGRID No. 6137	⁸ Operator Name Devon Energy Production, Company L. P.	⁶ Well Number 1
		⁹ Elevation 3195'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	26	T26S	R34E		1100	NORTH	1980	EAST	LEA

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

¹² Dedicated Acres 40	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ 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.

	¹⁷ 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 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 into by this organization. Signature: Date: 6/12/12
	Judy A. Hutton Regulatory Specialist Printed Name Judy.A.Hutton@dnr.com E-mail Address
	¹⁸ 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 of Survey Signature and Seal of Professional Surveyor Certificate Number

CMD :
0060001

ONCARD
MAINTAIN POOL

06/15/12 09:37:56
COPY TEXT

Pool Code : 91947 Pool Name : WC-025 G-09 S263426C;BONE SPRING
OCD Order No : R 0
Pool Type : O (O/S/P) Pool Creation Date : 01-01-1900
Pool Region : S (N/S) Last Update Date : 01-01-1900

Special Pool Rule :
Oil Well Spacing : 40 (Acres) Gas Well Spacing : (Acres)
Ostrich Well Leac : 330 (Ft from end line) 330 (Ft from side line)
(Ft from nearest well) 330 (Ft from P/Q line)
Top Soil Allowance : 410 (FOOD)
Casinghead Gas Limit : 820 (NOFD)
Gas Oil Limit : 2000
Depth Bracket : 12999 (feet)

Projected Oil (M/S) : Acres Basis : 100.00 (in 4)
Soliv Basis : (in 4)
Simultaneous Deduction Allowed (Y/N) : Y

M0015: Table update is successful.

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06 CONFIRM
PF07	PF08	PF09 COMMENT PF		PF10	