

District I  
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District II  
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District III  
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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

<sup>1</sup> API Number 30-025-41536	<sup>2</sup> Pool Code 2209	<sup>3</sup> Pool Name Antelope Ridge, Bone Spring West
<sup>4</sup> Property Code 40064	<sup>5</sup> Property Name West Copperline 29 Fed State Com	
<sup>7</sup> OGRID No. 249099	<sup>8</sup> Operator Name Caza Operating, LLC	<sup>6</sup> Well Number 3H <sup>9</sup> Elevation 3539 GL

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	29	23-S	34-E		150	North	1980	West	Lea

<sup>11</sup> 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
N	29	23-S	34-E		4962 <sup>317</sup>	North <del>SOUTH</del>	2027	West	Lea
<sup>12</sup> Dedicated Acres 160.06	<sup>13</sup> Joint or Infill Y	<sup>14</sup> Consolidation Code C	<sup>15</sup> Order No. NM 131909						

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.

<sup>16</sup>	<sup>17</sup> OPERATOR CERTIFICATION <i>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 by the division.</i>
	Signature _____ Date _____ <i>Richard L. Wright</i> 3/12/14 Printed Name Richard L. Wright E-mail Address rwright@cazapetro.com
	<sup>18</sup> SURVEYOR CERTIFICATION <i>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.</i>
	Date of Survey _____ Signature and Seal of Professional Surveyor: _____ Certificate Number _____

MAY 22 2014