

District I
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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 HOBBS OCD
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
(As Drilled)

JUL 23 2014

RECEIVED
WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-41612		² Pool Code 960		³ Pool Name Airstrip; Bone Spring	
⁴ Property Code 40342		⁵ Property Name Oriole State			⁶ Well Number 1H
⁷ OGRID No. 229137		⁸ Operator Name COG Operating LLC			⁹ Elevation 3999' GR

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
P	22	18S	34E		190	South	660	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
A	22	18S	34E		341	North	699	East	Lea

¹² Dedicated Acres 160	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.

16	Producing Area 10377-14465'			341'	BHL	699'	<p>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 by the division.</p> <p><i>Stormi Davis</i> 7/22/14 Signature Date</p> <p>Stormi Davis Printed Name</p> <p>sdavis@concho.com E-mail Address</p>		
				4752'		SHL		660'	
				Date of Survey					
				Signature and Seal of Professional Surveyor:					
REFER TO ORIGINAL PLAT									
				190'			Certificate Number		

SEP 23 2014