

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 394-6161 Fax: (575) 394-0720

DISTRICT II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

DISTRICT III
1000 Rio Brazos Rd., 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, New Mexico 87505

HOBBS OCD

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

RECEIVED

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-41985	Pool Code 2200	Pool Name Antelope Ridge; Bone Spring
Property Code 313502	Property Name MAD DOG 35 B3DM STATE COM	
OGRID No. 14744	Operator Name MEWBOURNE OIL COMPANY	
	Well Number 1H	Elevation 3450'

Surface Location

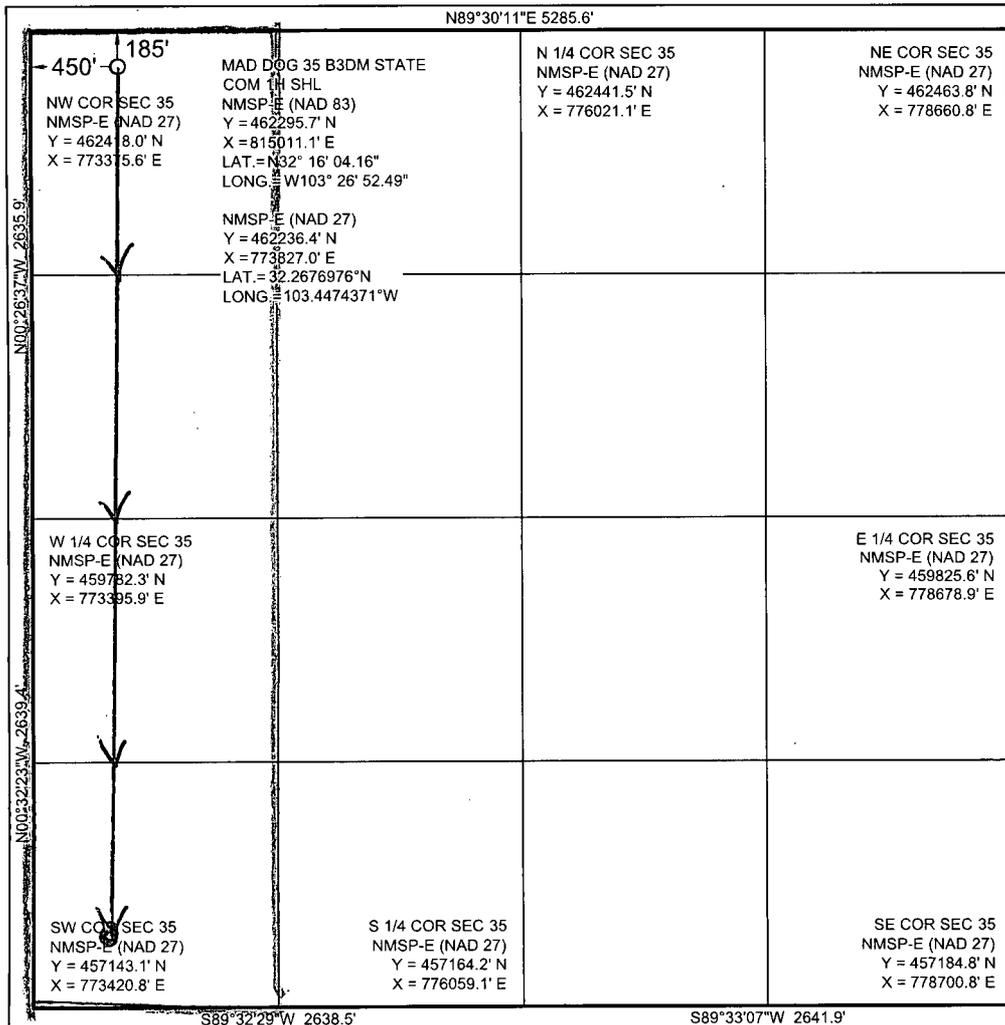
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	35	23 S	34 E		185	NORTH	450	WEST	LEA

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
M	35	23 S	34 E		331'	South	442'	West	LEA

Dedicated Acres	Joint or Infill	Consolidated Code	Order No.
160			

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 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 voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: Jackie Lathan Date: 11/12/14

Print Name: Jackie Lathan

E-mail Address: _____

SURVEYORS 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: JUNE 23, 2014

Signature and Seal of Professional Surveyor: James E. Tompkins

Job No.: WTC49984
 JAMES E. TOMPKINS 14729
 Certificate Number

DEC 17 2014