

APR 21 2016

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

**DISTRICT I**  
1825 N. FRENCH DR., HOBBS, NM 88240  
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 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) 476-3480 Fax: (505) 476-3482

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 SOUTH ST. FRANCIS DR.  
Santa Fe, New Mexico 87505

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-025- <b>43167</b>	Pool Code 96553	Pool Name Ojo Chiso; Bone Spring
Property Code <b>316103</b>	Property Name SQUINTS FEDERAL COM	Well Number 7H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3404.4'

**Surface Location**

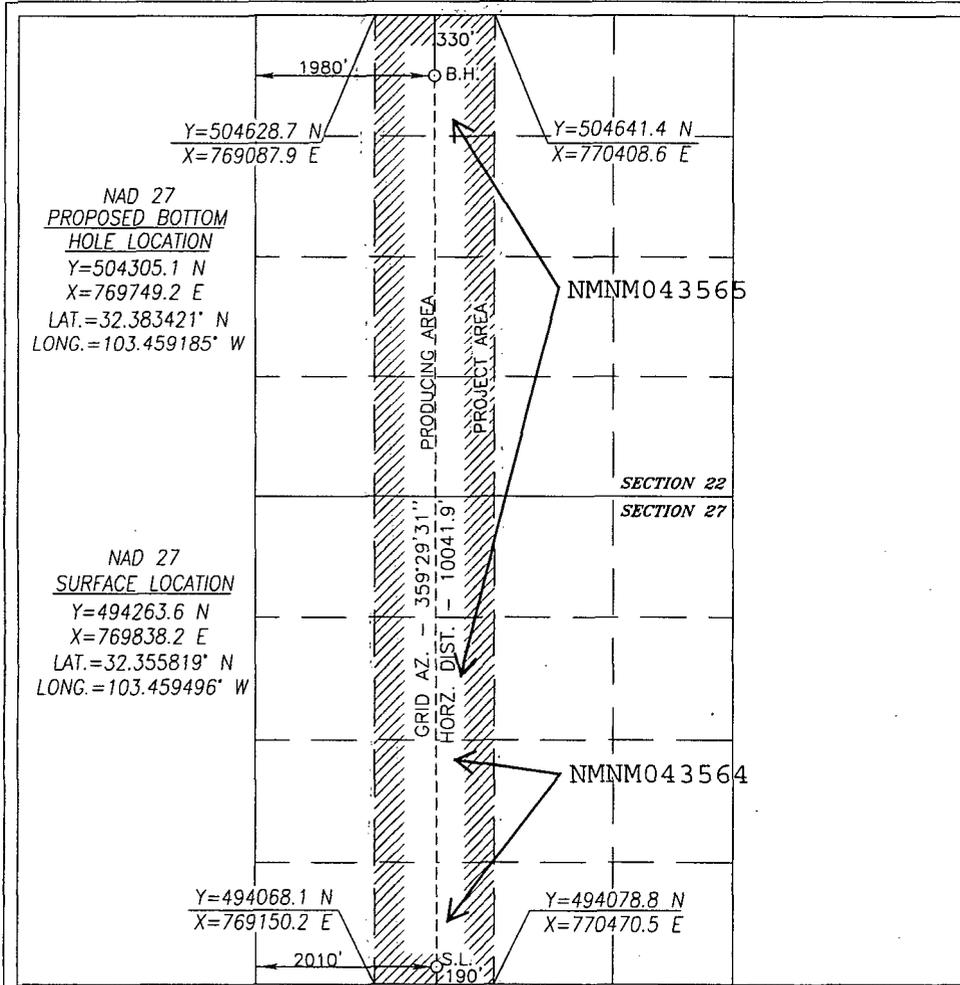
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	27	22-S	34-E		190	SOUTH	2010	WEST	LEA

**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
C	22	22-S	34-E		330'	NORTH	1980	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320			

**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 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 mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by this division.

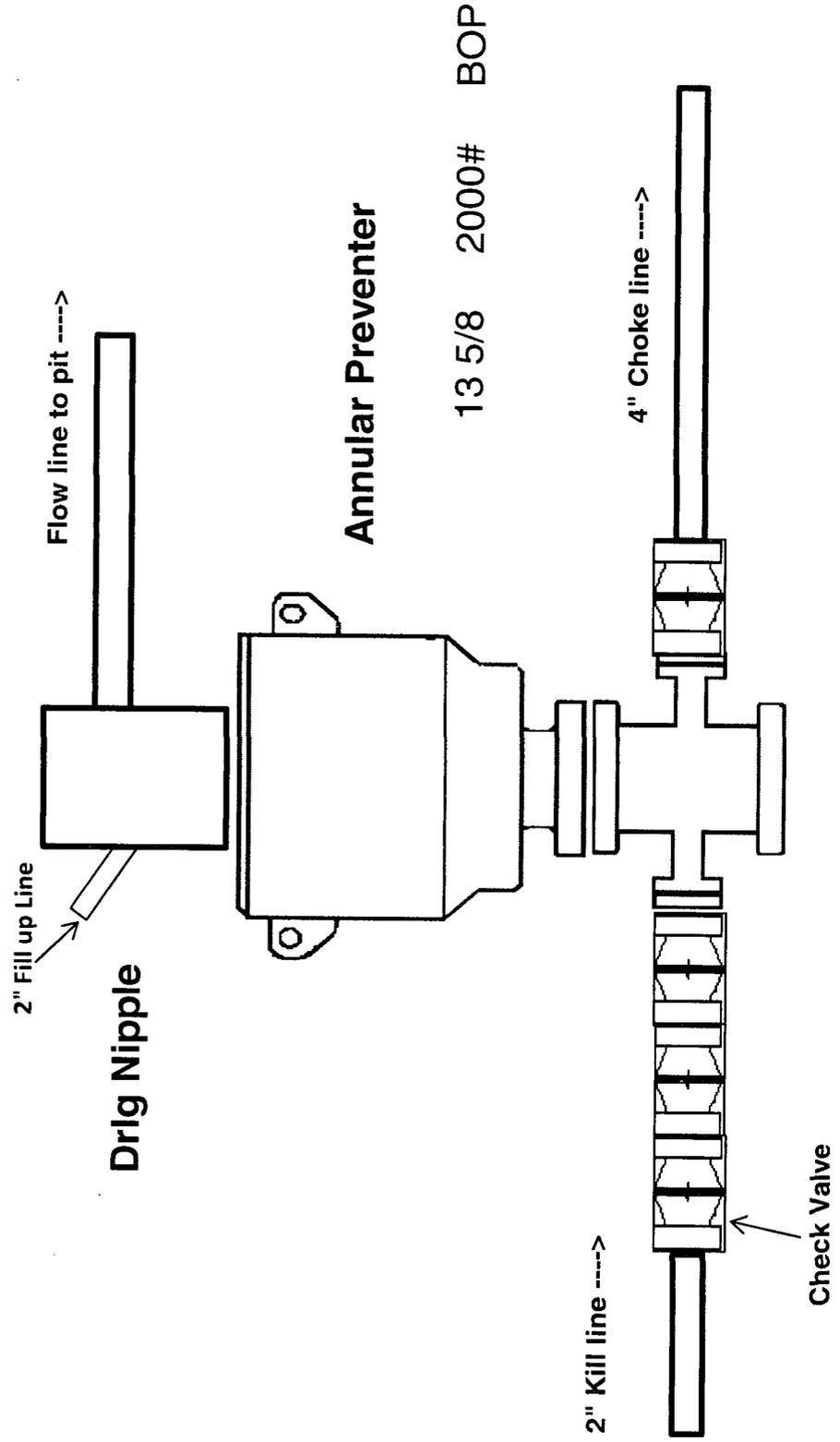
*Melanie J Wilson* 7/20/15  
Signature Date  
Melanie J Wilson  
Printed Name  
mwilson@concho.com  
E-mail Address

**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.

JANUARY 9, 2015  
Date of Survey

Signature & Seal of Professional Surveyor  
*Chad L. Harcrow*  
CHAD L. HARCROW  
NEW MEXICO  
LICENSED PROFESSIONAL SURVEYOR  
17777  
6/12/15  
Certificate No. CHAD HARCROW 17777  
W.O. # 15-710 DRAWN BY: AF

# 2,000 psi BOP Schematic

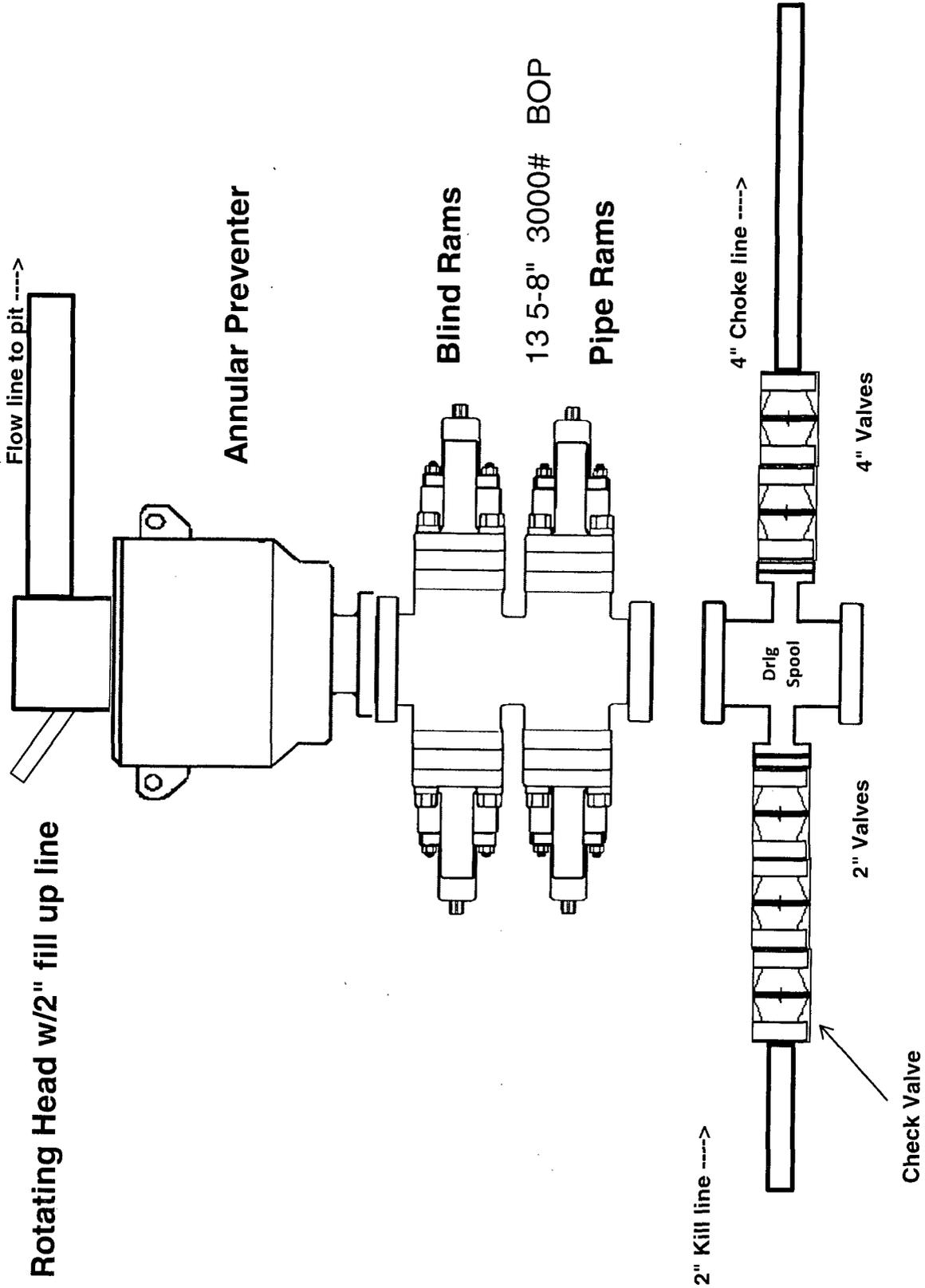


HOBBS CCD

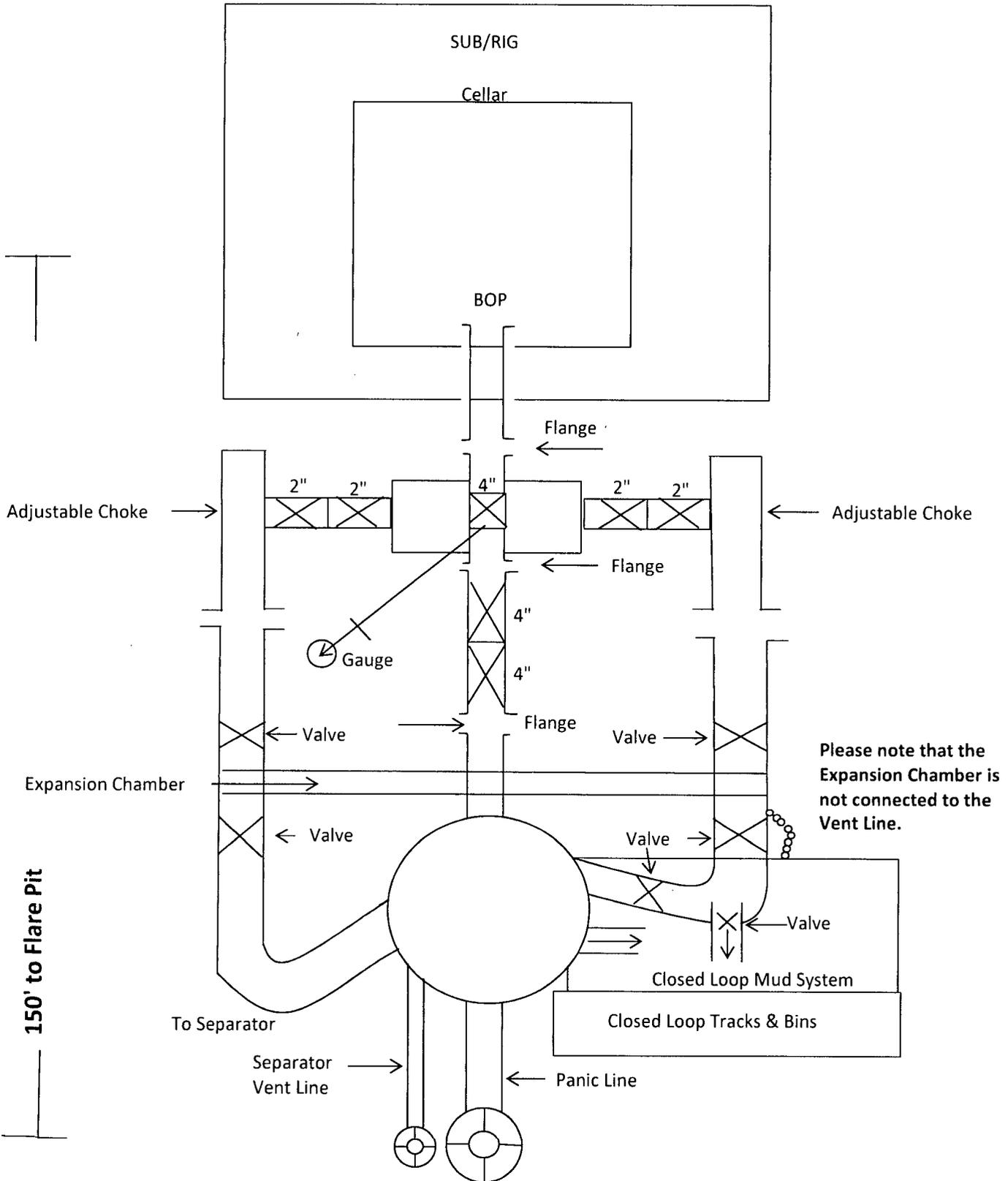
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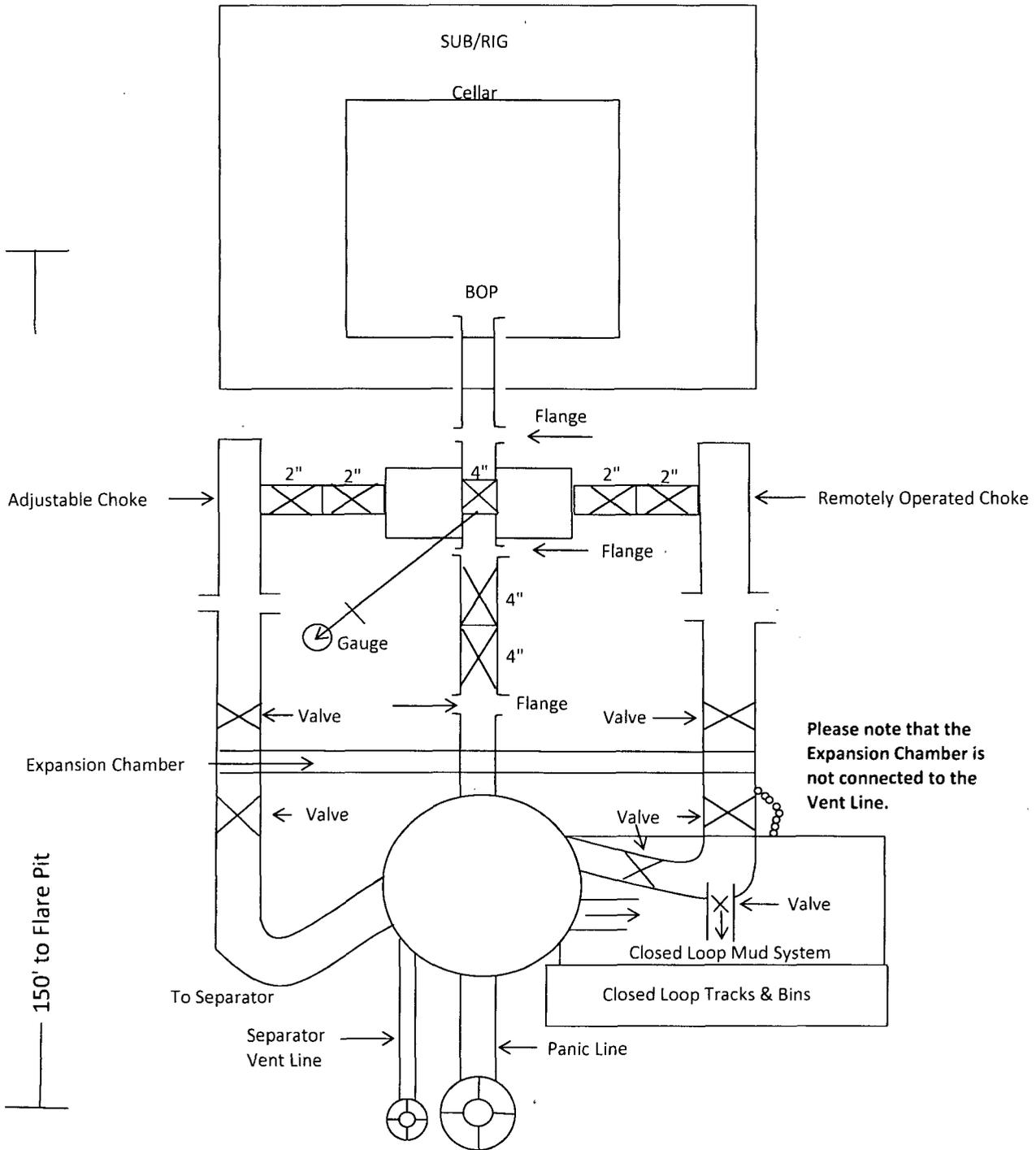
# 3,000 psi BOP Schematic

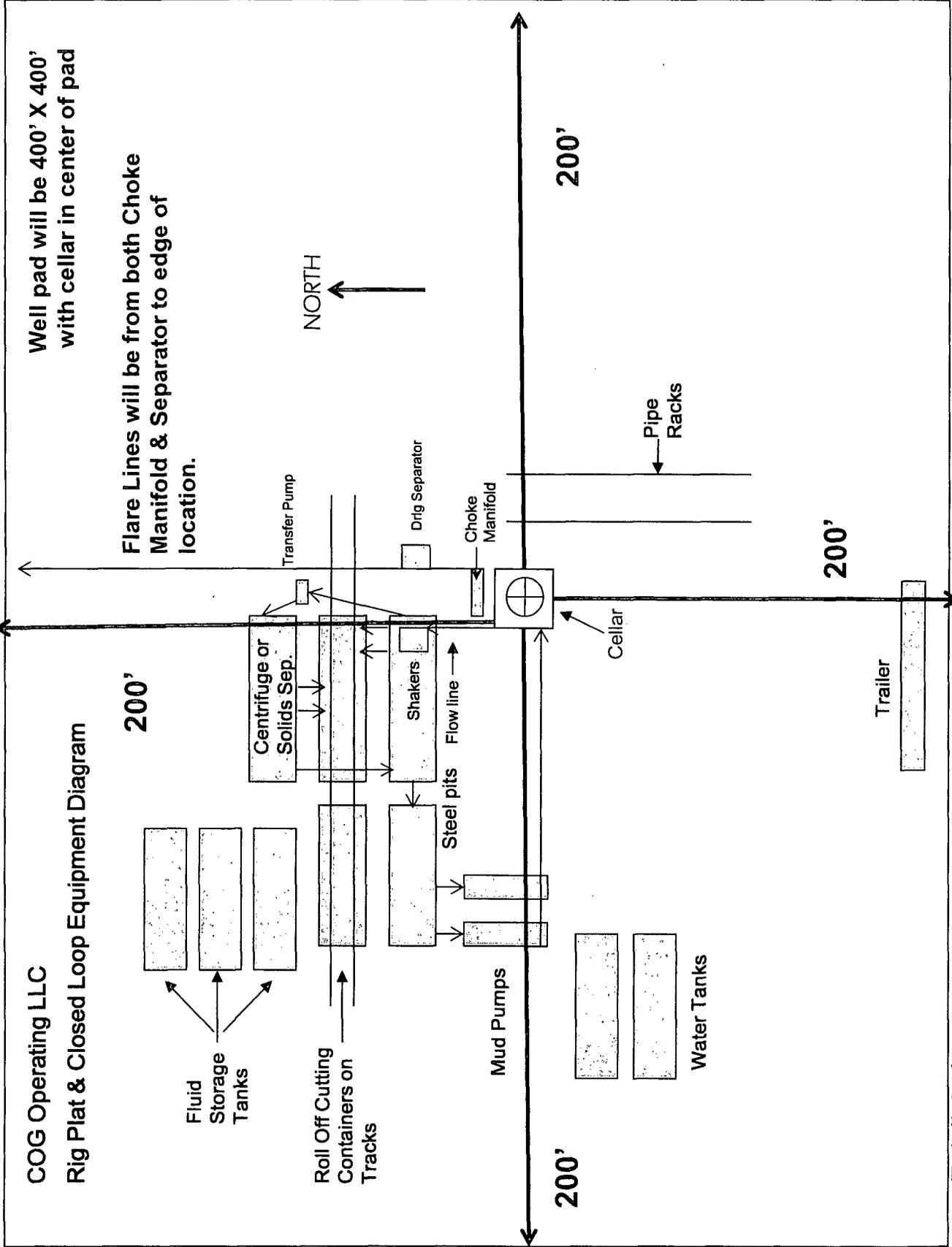


# 2M Choke Manifold Equipment



# 3M Choke Manifold Equipment



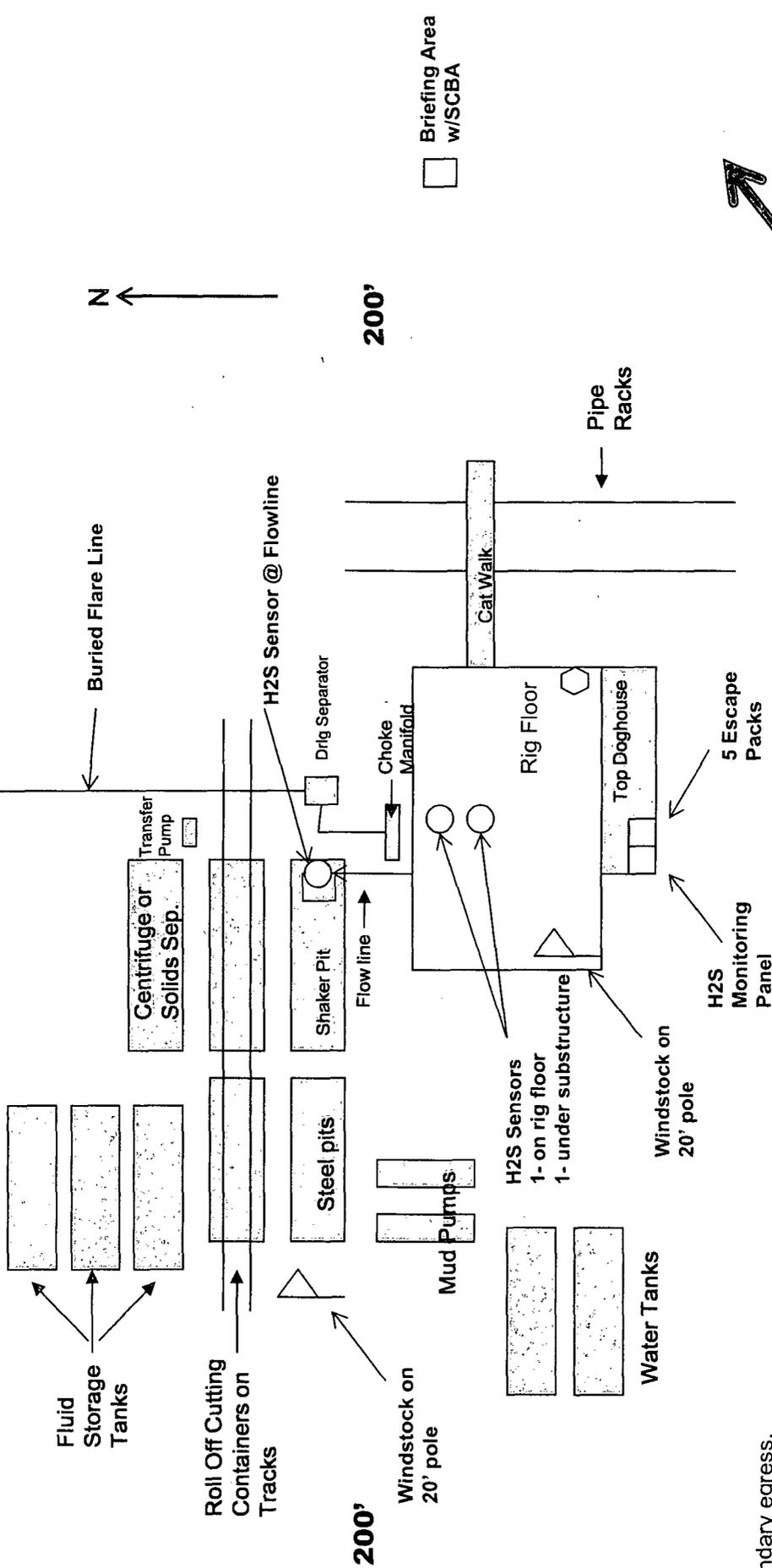


\* I further certify that COG will comply with Rule 19.15.17 NMAC by using a Closed Loop System.\*

COG Operating LLC  
 H<sub>2</sub>S Equipment Schematic  
 Terrain: Shinnery sand hills.

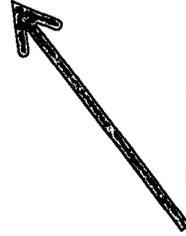
Well pad will be 400' X 400'  
 with cellar in center of pad

Location Entry  
 Condition Sign



200'

Briefing Area  
 w/SCBA



Prevailing Wind  
 Direction in SENM

200'

Company Representative's Trailer

Primary Briefing  
 Area w/SCBA

Secondary egress.

