

DISTRICT I  
1625 N. FRENCH DR., HOBBS, NM 88240  
Phone: (575) 393-6191 Fax: (575) 393-0720

DISTRICT II  
511 S. FIRST ST., ARTESIA, NM 86210  
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

**HOBBS OCD**

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

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

DEC 30 2016  
**RECEIVED**

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-025-43124	Pool Code 41440	Pool Name Lusk; Bone Spring
Property Code 308161	Property Name LUSK DEEP UNIT A	Well Number 31H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3590.7'

**Surface Location**

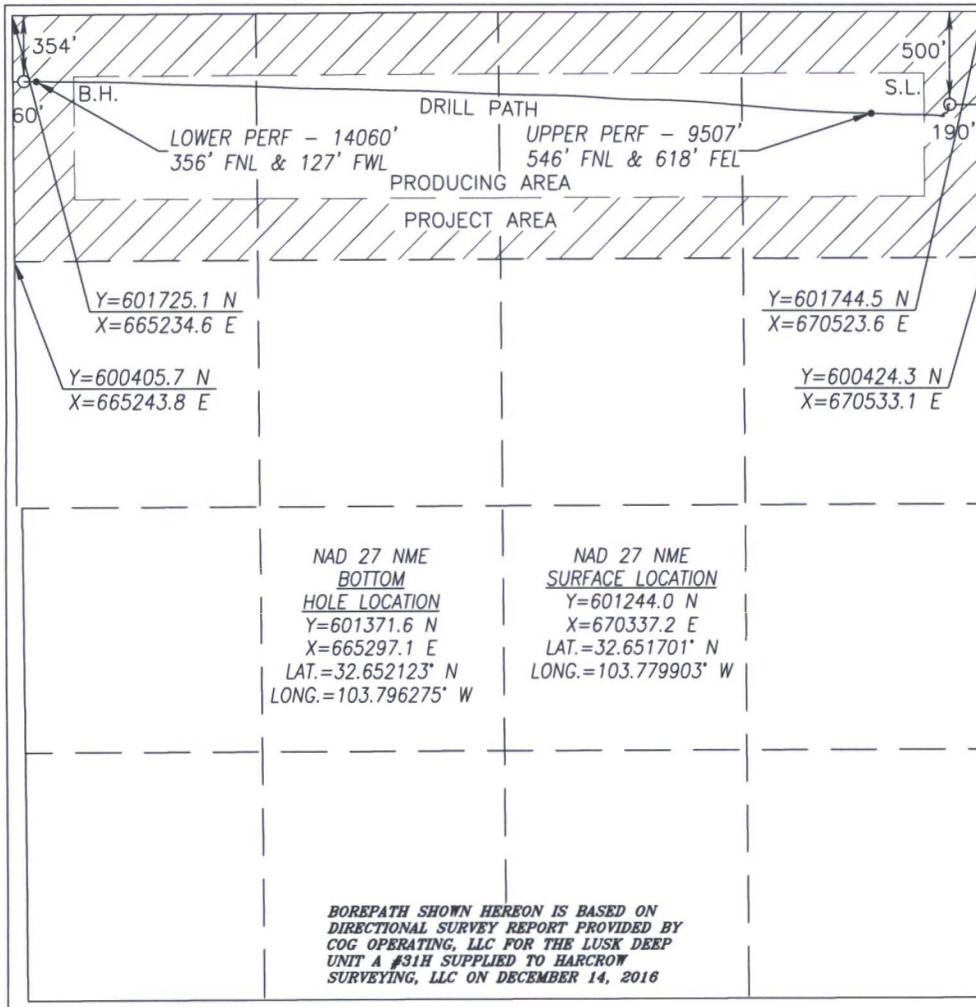
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	20	19-S	32-E		500	NORTH	190	EAST	LEA

**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
D	20	19-S	32-E		354	NORTH	60	WEST	LEA

Dedicated Acres 160	Joint or Infill	Consolidation Code	Order No. NSL-7452
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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**



**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 the division.

*Stormi Davis* 12/21/16  
Signature Date

**Stormi Davis**  
Printed Name

**sdavis@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.

**DECEMBER 14, 2016/JULY 4, 2016**  
Date of Survey/Date of Geographic Survey

Signature & Seal of Professional Surveyor

**CHAD L. HARCROW**  
**NEW MEXICO**  
**17777**  
**LICENSED PROFESSIONAL SURVEYOR**

*Chad Harcrow* 12/20/16  
Certificate No. CHAD HARCROW 17777  
W.O. # 16-1094 DRAWN BY: CF