

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) 748-1181 Fax: (575) 748-0720
District III
1000 Rio Grande Road, Artesia, 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
NOV 06 2018
RECEIVED

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
AS DRILLED

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-44187	Pool Code 96229	Pool Name Mesa Verde; Bone Spring
Property Code 320828	Property Name MEGA VERDE DS Unit	Well Number 114
OGRID No. 14696	Operator Name OXY USA INC.	Elevation 3569.8'

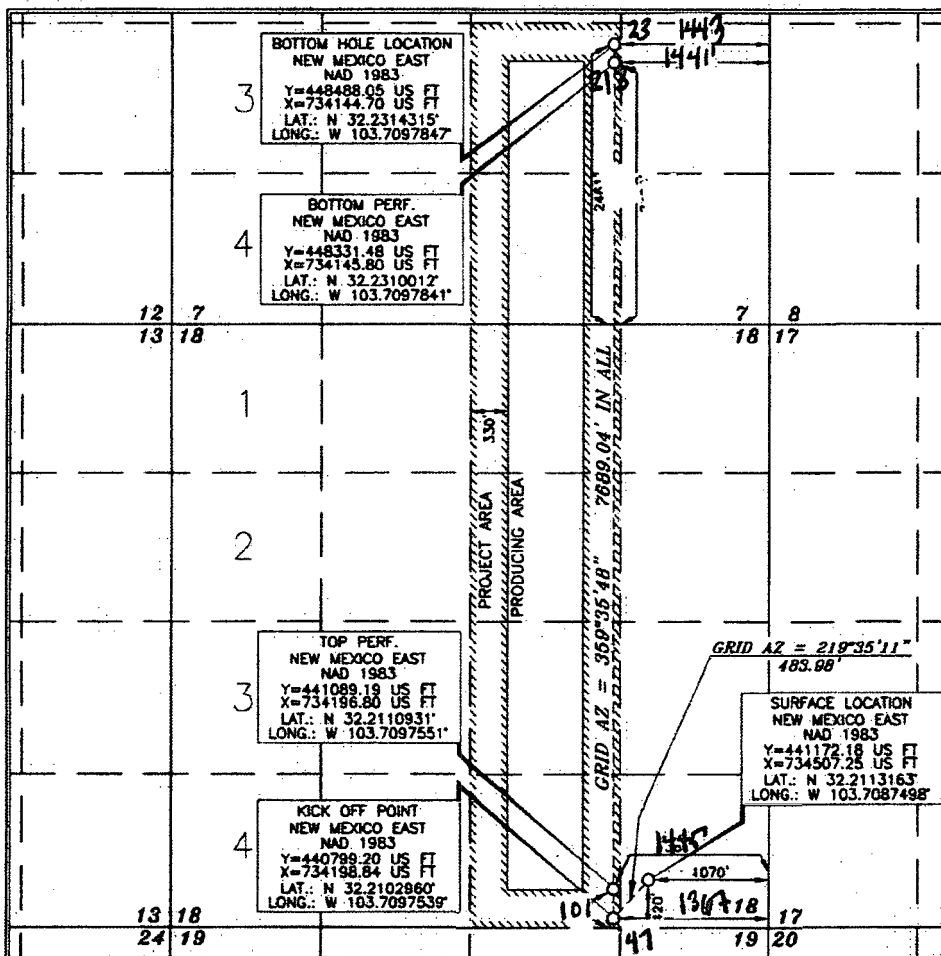
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	18	24 SOUTH	32 EAST, N.M.P.M.		420'	SOUTH	1070'	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
J	7	24 SOUTH	32 EAST, N.M.P.M.		23'	NORTH	1443'	EAST	LEA
Dedicated Acres		Joint or Infill	Consolidation Code	Order No.	FTV - 101' FSL 1443' FEL LTP - 213' FNL 1441' FEL				

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 undivided 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.

Hereby entered by the division.
Signature *Sarah Chapman* Date *8/2/18*
Printed Name *Sarah Chapman*
E-mail Address *sarah_chapman@oxy.com*

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted by the use of actual surveys made by or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey *OCTOBER 1, 2015*
Signature and Stamp *TERRY J. AS...*
Professional Surveyor

Terry J. As... 9/24/2016
Certificate Number 15079