

District I
1621 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-6170
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Grande Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87503
Phone: (505) 476-3460 Fax: (505) 476-3463

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 30-025-45182	Pool Code	Pool Name W: Heat Wolfcamp
Property Code	Property Name LOST TANK "30-19" FEDERAL Com.	Well Number 31H
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 3609.0'

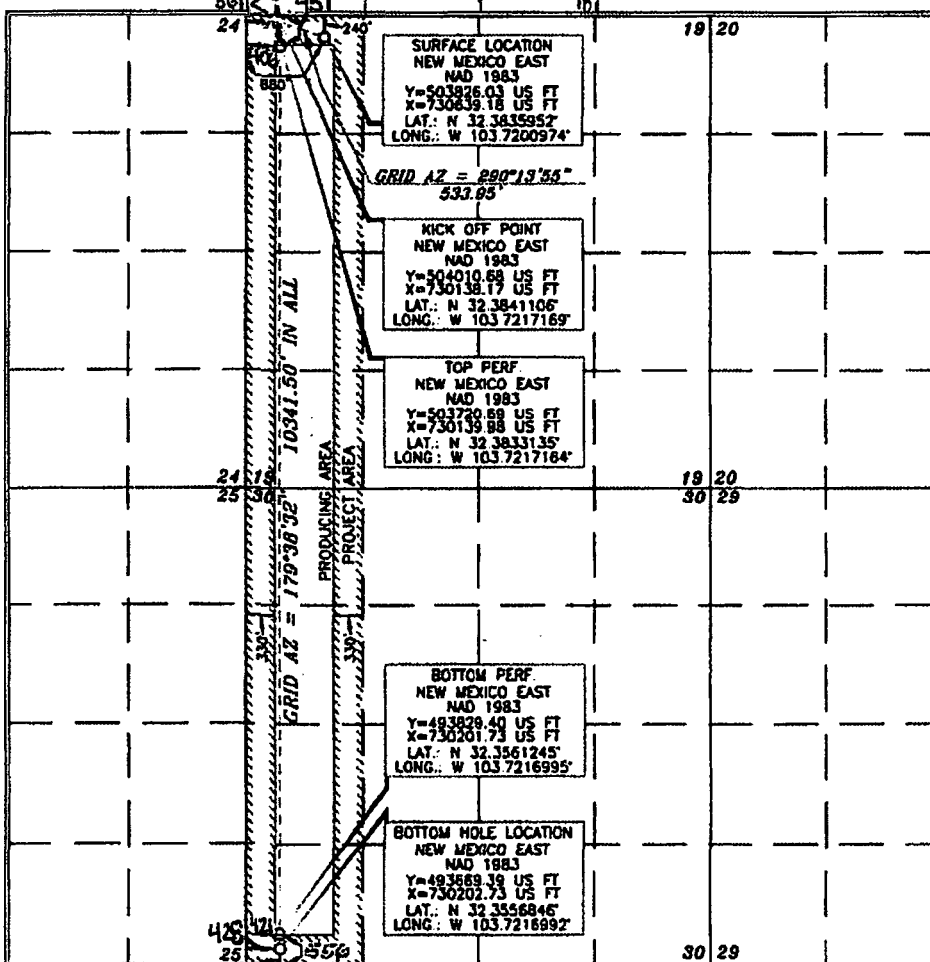
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	19	22 SOUTH	32 EAST, N.M.P.M.		240'	NORTH	880'	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	30	22 SOUTH	32 EAST, N.M.P.M.		319'	SOUTH	428'	WEST	LEA
Dedicated Acres 320	Joint or Infill Y	Consolidation Code	Order No.	PTP/TP: 451' FNL 400' FWL LFP/BP: 556' FSL 421' FWL					

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 the 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.

Authorized by the division
Signature: **Leslie Reeves** Date: **11/28/18**
Printed Name: **LESLIE REEVES**
E-mail Address: **LESLIE-REEVES@OXY.COM**

SURVEYOR CERTIFICATION

I hereby certify that the information shown on this plat was plotted from the original survey made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey: **OCTOBER 6, 2017**
Signature and Stamp: **Jerry J. As...**
Professional Surveyor
Certificate Number: **15079**