District I 1625 N. French Dr., H Phone: (575) 393-616 District II 811 S. First St., Artesi Phone: (575) 748-128: District III 1000 Rio Brazos Road Phone: (505) 334-6170 District IV 1220 S. St. Francis Dr. Phone: (505) 476-3460	93-0720 8-9720 7410 4-6170 1 87505	Pagas	gy, Mine OIL C 12 J Cle OCATION	mit one o	Form C-102 sed August 1, 2011 copy to appropriate District Office ENDED REPORT							
' API Number				LOCATION AND ACREAGE DEDICATION PLAT <sup>2</sup> Pool Code <sup>2</sup> Pool Name				me				
30-025-20874				41540		Lusk Delaware, West						
<sup>4</sup> Property Code				<sup>3</sup> Property Name						<sup>6</sup> Well Number		
315243			Lusk Federal A							52		
'OGRID No.			Operator Name							* Elevation		
20595			Shackelford Oil Co									
		· · · · · · · · · · · · · · · · · · ·			» Surface	Location						
UL or lot no.	Section	Township	Range	Lot Idn	Feet from th	e North/South line	Feet from the	East/	West line	County		
L	20	19S	32E		165	0 SOUTH	990		EAST	LEA		
" Bottom Hole Location If Different From Surface												
UL or lot no.	Section	Township	Range	Lot Idn	Feet from th	e North/South line	Fect from the	East/	West line	County		
<sup>12</sup> Dedicated Acres	<sup>13</sup> Joint o	r Infill <sup>14</sup> Co	onsolidation	Code <sup>15</sup> Or	der No.							

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.

16			" 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 a
			voluntary pooling agreement or a compulsory pooling order heretofore entered
			by the division.
			4/17/19 Signame
			Brady Shalkelford Printed Name brady Detro charservices.com
			Email Address Cho Chowservices . Com
++++++++++++++++++++++++++++++++++++++		 	CUDUEVOD CEDTIEICATION
			<b>*SURVEYOR CERTIFICATION</b>
F 3		, · · ·	I hereby certify that the well location shown on this plat was
1 3	· ·		plotted from field notes of actual surveys made by me or under
			my supervision, and that the same is true and correct to the
- 990'			best of my belief.
······································	[		
	Ł		
- <del> </del>			Date of Survey
_			Signature and Seal of Professional Surveyor:
1650			
<b>B</b> .			
			Certificate Number