

DISTRICT I
1625 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) 745-1223 Fax: (575) 745-0720

DISTRICT III
1 Rio Brason Rd., Artec, NM 87410
Phone (505) 234-0178 Fax: (505) 234-0176

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 478-3450 Fax: (505) 478-3452

State of New Mexico
Energy, Minerals and Natural Resources Department

HOBBS OCD

Form C-102
Revised August 4, 2011

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

FEB - 4 2019

RECEIVED

Submit one copy to appropriate District Office

WELL LOCATION AND ACREAGE DEDICATION PLAT

AMENDED REPORT

API Number <i>30-025-45012</i>	Pool Code <i>37870</i>	Pool Name <i>Leggi Bone Spring</i>
Property Code <i>322148</i>	Property Name AO 6	Well Number 502H
OGRID No. <i>372417</i>	Operator Name ADVANCE ENERGY PARTNERS HAT MESA	Elevation 3629'

Surface Location

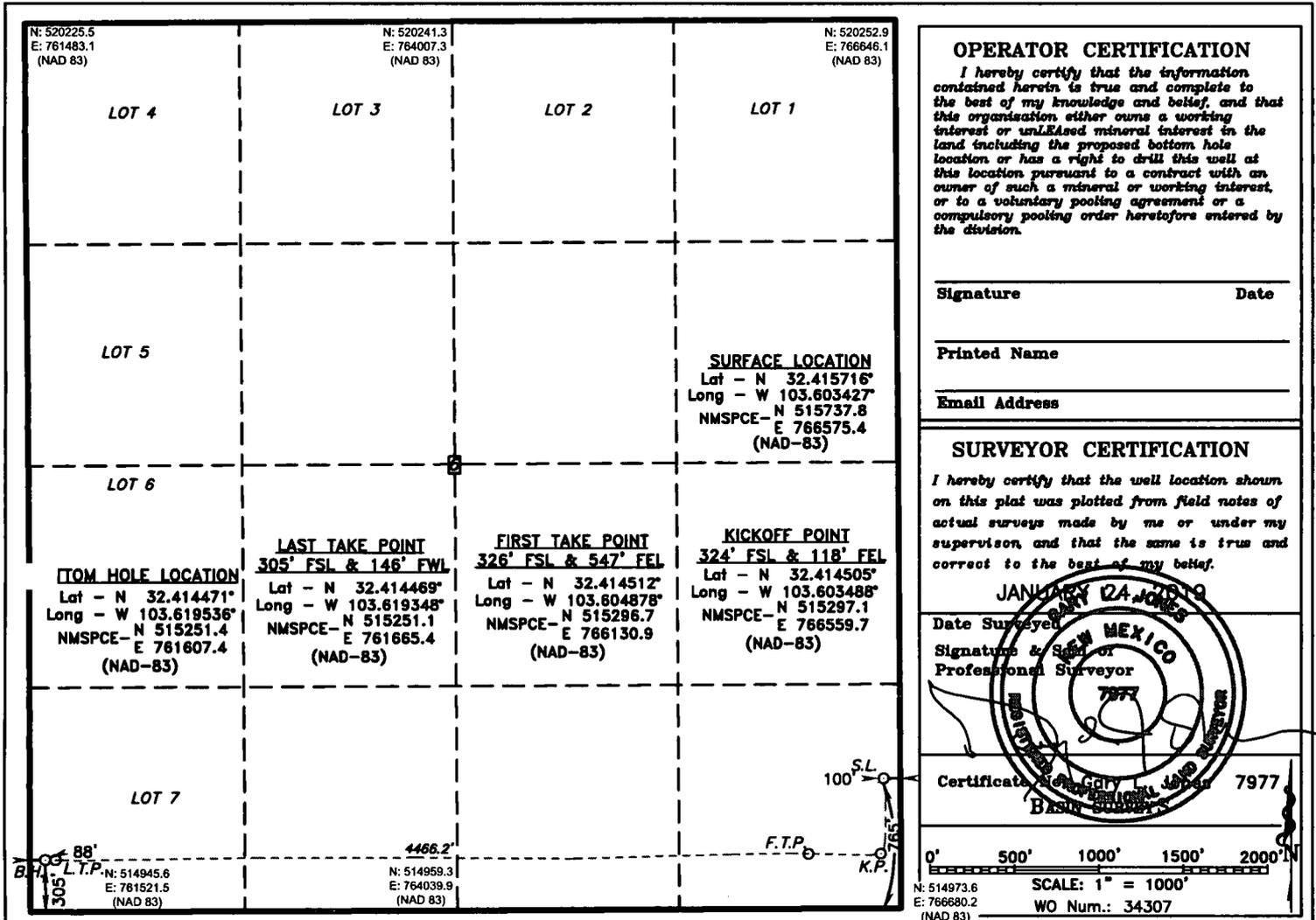
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
P	6	22 S	33 E		765	SOUTH	100	EAST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
LOT 7	6	22 S	33 E		305	SOUTH	88	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order 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



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.

Signature _____ Date _____

Printed Name _____

Email 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 24 2019

Date Surveyed _____

Signature & Seal of Professional Surveyor _____

Certificate No. GARY L. JONES 7977

Basin _____

0' 500' 1000' 1500' 2000'

SCALE: 1" = 1000'

WO Num.: 34307