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**DISTRICT I**  
1625 N. FRENCH DR., HOBBS, NM 88240  
Phone: (575) 833-6161 Fax: (575) 833-0760

**DISTRICT II**  
811 S. FIRST ST., ARTESIA, NM 88210  
Phone: (575) 746-1263 Fax: (575) 746-0720

**DISTRICT III**  
1000 RIO BRAZOS RD., AZTEC, NM 87410  
Phone: (505) 834-6178 Fax: (505) 834-6170

**DISTRICT IV**  
1820 S. ST. FRANCIS DR., SANTA FE, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

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

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-025- <u>4 9851</u>	Pool Code 97895	Pool Name WC-025 G-08 S213304D; Bone Spring
Property Code <u>72-5335</u>	Property Name DELICIOUS LIME STATE COM	Well Number 601H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3742.7'

**Surface Location**

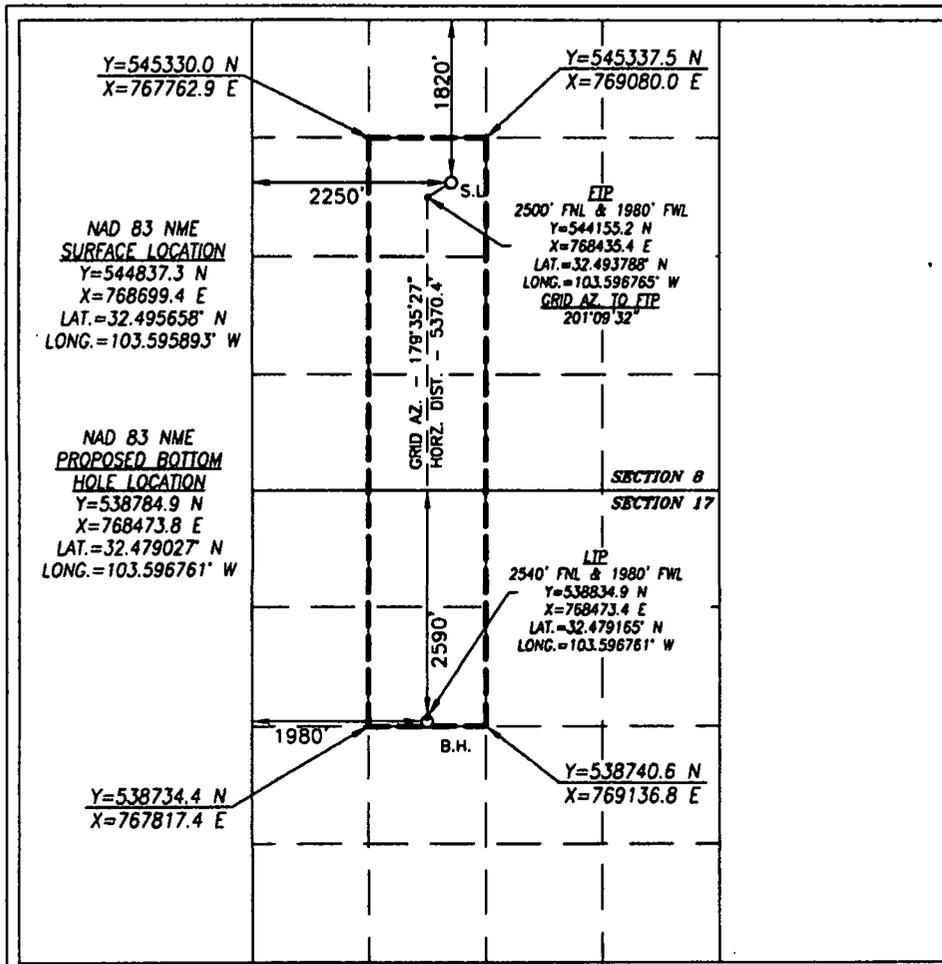
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	8	21-S	33-E		1820	NORTH	2250	WEST	LEA

**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
F	17	21-S	33-E		2590	NORTH	1980	WEST	LEA

Dedicated Acres 200	Joint or Infill	Consolidation Code	Order No.
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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.

*[Signature]* 04/11/19  
Signature Date

Robyn M. Russell  
Printed Name  
Russell@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 19, 2018  
Date of Survey

Signature & Seal of Professional Surveyor

*[Seal: CHAD L. HARCROW, NEW MEXICO, LICENSED PROFESSIONAL SURVEYOR, 17777]*

*[Signature: Chad Harcrow]* 1/23/19  
Certificate No. CHAD HARCROW 17777  
W.O. #18-1756 DRAWN BY: JR