District I

1625 N. French Dr., Hobbs, NM 88240

<u>District II</u>

1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410 District IV

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 June 10, 2003

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

1220 S. St. Francis	s Dr., Santa	Fe, NM 87505	1					∐ AME	ENDED REPORT	
		WF	ELL LO	CATION	I AND ACR	EAGE DEDIC	ATION PLA	хT		
¹ API Number			T_{α}	Pool Code		³ Pool Name				
30-	-025-1244	19	4	752	3	Wildcat; Glorieta				
⁴ Property Code		⁵ Property Name							' Well Number	
006355				M.D. Self					005	
OGRID 1	No.				' Elevation					
229137	229137					3025'				
					¹⁰ Surface l	Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
D	6	26S	38E	i [330	North	330	West	Lea	
			11 Bot	tom Hole	e Location If	Different From	n Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
				L						
12 Dedicated Acres	s ¹³ Joint of	r Infill "C	onsolidation (Code 15 Orr	der No.					
40	ļ									

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 330' FNL 17 OPERATOR CERTIFICATION I hereby certify that the information contained herein 330' FWL is true and complete to the best of my knowledge and belief. Diane Kuykendall Printed Name Regulatory Analyst Title and E-mail Address 1/06/06 18SURVEYOR 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. Date of Survey Signature and Seal of Professional Surveyor: Certificate Number

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API Number				² Pool Code		³ Pool Name					
30-025-12449			}	34220		Justis; Blinbry-Tubb-Drinkard					
Property Code 006355				' Property Name M.D. Self					' Well Number 005		
	OGRID No. Operator Name COG OPERATING LLC					· ·	' Elevation 3025'				
					¹⁰ 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	6	26S	38E	ĺ	330	North	330	West	Lea		
	*******		11 Bot	tom Hol	e Location If	Different From	m Surface				
UL or lot no.	Section	Township	Range	Lot ldn	Feet from the	North/South line	Feet from the	East/West line	County		
¹² Dedicated Acre	s ¹³ Joint o	r Infill 14 C	onsolidation	Code 15 Or	der No.	L					

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

	11011 511111	DARD CIVIT TIME BLI	MINDINO ILL DI II	ID DIVIDIOIY
¹⁶ 330' FNL				¹⁷ OPERATOR CERTIFICATION
→ ŏ				I hereby certify that the information contained herein is true
330' FWL				and complete to the best of my knowledge and belief.
				Signature Signature
				Diane Kuykendall
**********				Printed Name
				Regulatory Analyst
				Title and E-mail Address
				1/06/06
				Date
				18SURVEYOR 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.
				Date of Survey
				Signature and Seal of Professional Surveyor:
			·	-
				Certificate Number