District I

1625 N. French Dr., Hobbs, NM 88240

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-102 Revised August 15, 2000

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

## OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

Submit to Appropriate District Office State Lease - 4 Copies

Fee Lease - 3 Copies

AMENDED REPORT

<sup>1</sup> API Number				<sup>2</sup> Pool Code		<sup>3</sup> Pool Name					
30-025-01028				03990 Bagley; Siluro Devonian							
<sup>4</sup> Property Code		<sup>5</sup> Property Name							<sup>6</sup> Well Number		
024980				001							
<sup>7</sup> OGRID No.				<sup>9</sup> Elevation							
164070						4250'					
	···································				<sup>10</sup> 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	02	12S	33E		660'	North	660'	West	Lea		
			11 B	ottom Ho	ole Location I	f Different Fron	n Surface		<u> </u>		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West lin	County		
12 - 11	113	T Gn   14		15.0	L	, ,	<u></u>				
12 Dedicated Acres	Joint	or Infili 14	Consolidation	Code CO	rder No.						
40	40 R-69-E										
NO ALLOW						<u> </u>					

NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<sup>16</sup> <b>4</b>		·	<sup>17</sup> OPERATOR CERTIFICATION
			I hereby certify that the information contained herein is true
660'			and complete to the best of my knowledge and belief.
•— ·			Ar
			Signature
			Ann Westberry
	 		Printed Name
			Manager, Corporate Support
		-	Title
			[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
			October 6, 2003
			Date
			<sup>18</sup> 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.
			to the vest of my verteg.
			Date of Survey
			Signature and Seal of Professional Surveyor:
			Certificate Number