State of New Mexico

Form C-102 Revised October 12, 2005

1625 N. French Dr., Hobbs, NM 88240 Received Minerals & Natural Resources Department District II
1301 W. Grand Avenue, Artesia, NM 88210 CONSERVATION DIVISION

Submit to Appropriate District Office State Lease - 4 Copies

District III

MAY 1 8 2009

1220 South St. Francis Dr.

1000 Rio Brazos Rd., Aztec, NM 87410 Fee Lease - 3 Copies HOBBSOCD Santa Fe, NM 87505 **District IV** 1220 S. St. Francis Dr., Santa Fe, NM 87505 AMENDED REPORT WELL LOCATION AND ACREAGE DEDICATION PLAT ² Pool Code 1 API Number Skaggs Drinkard 57000 30-025-26268 ⁵ Property Name ⁶ Well Number 4 Property Code 31450 SEMU 104 7 OGRID No. 8 Operator Name ⁹ Elevation 217817 ConocoPhillips Company **Surface Location** UL or lot no. Township Range Lot Idn Feet from the North/South line Feet from the East/West line Section County 20 38E 1980 South 1650 West K **20S** Lea ¹¹ 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 12 Dedicated Acres ³ Joint or Infill 14 Consolidation Code ⁵ 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.

16			¹⁷ 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, of to a voluntary pooling agreement or a compulsory pooling
			order heretofore entered by the division.
			5/12/09
			Signature Date
			Signature
			Donna Williams
			Printed Name
	((- (- (- (- (- (- (- (- (- (¹⁸ SURVEYOR CERTIFICATION
			I hereby certify that the well location shown on this
	`	-	plat was plotted from field notes of actual surveys
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			made by me or under my supervision, and that the
	Ì	\	same is true and correct to the best of my belief.
\			
	11/		 Date of Survey
	/ / / /		
			Signature and Seal of Professional Surveyor
			Certificate Number
			Continuate Number
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