

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

* API Number 30-025-31267		* Pool Code 51687	* Pool Name East Red Tank Bone Spring
* Property Code 16562	* Property Name White Lightnin'		* Well Number 1
* OGRID No. 003474	* Operator Name TOCO, L.L.C.		* Elevation 3639.1

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot lde	Feet from the	North/South line	Feet from the	East/West line	County
I	19	22S	33E		1980	South	660	East	Lea

" Bottom Hole Location If Different From Surface

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UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
" Deduct - 1 Acres 40	" Joint or Infill	" Consolidation Code		" Order No.					

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL DEEDS

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

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16					17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. <u>Deborah McKelvey</u> Signature <u>Deborah McKelvey</u> Printed Name <u>Agent</u> Title <u>2/24/95</u> Date
					18 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. _____ Date of Survey _____ Signature and Seal of Professional Surveyor: _____ Certificate Number

660'

1980'