und 1 O Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719

District U

State of New Mexico ergy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

Form C-102 Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies Fee Lease - 3 Copies

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

PO Box 2088, Santa Fe, NM 87504-2088

PO Box 2088 Santa Fe, NM 87504-2088

AMENDED REPORT

			WE	LL LC	CAT	TON A	ND AC	REAGE DED	ICATION P	LAT			
API Number						ol Code		WILDCAT BONE SPRING					
' Property Code						operty Name 'Well Number							
OGRID No.		BI	BITSY FEDERAL									1	
015445		MY	co t	NDHST	RIFS	, INC.	'Operato	ocrator Name			' Elevation		
			Surface Location						35	50			
1 - 1			Township Rail 23S 3:		Lot I		from the	North/South line	Feet from the	East/West line		T	
		238				19		NORTH	660	EAST		County LEA	
Bottom Hole Location If Different From Surface													
OL or lot bo.	Section	Townsh	ا ونا	Range	الما	in Feet	from the .	North/South line	Feet from the	East/West	tine	County	
" Dedicated Acres " Joint		or Infill H Con		asolidation	C	ode <sup>13</sup> Order No.							
40					Code	" Order N	· ·						
NO ALLOW	VABLE	WILL B	E AS	SIGNE	о то	THIS CO	MPLETIC	ON UNTIL ALL	DUTED COTO II				
		OR	A N	ON-STA	NDA	RD UNIT	HAS BE	EN APPROVED	BY THE DIVI	ave bee Sion	N CON	SOLIDATED	
16									17 OPERATOR CERTIFICATION				
									I hereby certify that the information contained herein is true and complete to the best of my browledge and belief				
									. The and conv	Hele to the be	st of my h	nowledge and belig	
								80	00-60 0 200				
								61					
									Signature Signature				
								Clifton R. May					
							Ø 660 -	Printed Name					
		!						/ " /	Title	Authorized Agent			
,							NM-86923	/I	3-27-96 Date				
				·			_ /		/				
							1		SOKAF	YOR C	ERTI	FICATION	
									HOUSE PROGRAM STOR	n steid notes o	facoual s	thorns on this plat with made by	
	•								me or under my and correct to u	supervision.	and that t	the same is one	
									3/25	5/96	-	ı	
									Date of Survey	- 25			
									Signature and Sc	al of Professi	ooul Surv	ryar.	
											7 /E		
									1 100	3840	1 / 1		
									Som	X-A			
							1		Certificate Numb	out of		m	