Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
<u>District I</u> Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240		June 19, 2008 WELL API NO.		
District II		30-015-04234		
District III 1220 South St. Francis Dr		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505			Federal Lease #NMLC029342H	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Brigham H	
1. Type of Well: Oil Well Gas Well Other			8. Well Number	
2. Name of Operator  COG Operating LLC			9. OGRID Numb	ber 229137
3. Address of Operator 550 W. Texas Ave., Suite 100 Midland, TX 79701			10. Pool name or Wildcat	
4. Well Location			MAR.LO	CO; GIOKICIA- 9070
1	1650 feet from the South	line and 330	feet from the	West line 29/8
Section 21	Township 17S Range	30E NMPM		ounty
	11. Elevation (Show whether DR, 3634' GR	RKB, RT, GR, etc.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRII			· —	ALTERING CASING ☐ P AND A ☐
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT		PANDA LI
DOWNHOLE COMMINGLE			_	
OTHER:		OTHER:	Pool Chang	ge 🛛
13. Describe proposed or comp	oleted operations. (Clearly state all p			
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
COG Operating LLC respectfully request to have this well's pool changed from the Loco Hills (96718) to				
the Mar Loco; Glorieta-Yeso (97866).				
RECEIVED				
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Spud Date:	Rig Release Da	te:		
Thombus and Go shot sha information	above is true and complete to the be	est of my knowledge	e and helief	
Thereby certify that the phorpador	· )			
SIGNATURE CONTRACTOR	TITLE Pe	rmitting Tech	DATE	03/09/2012
Type or print name Kelly J. Holly, E-mail address: kholly@concho.com PHONE: 432-685-4384				
For State Use Only 3/9/2012				
APPROVED BY:	TITLE OF	ouvigio!	D	ATE 3/1/2010
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