Submit 5 Copies 10 Appropriate Dist	State of New Mexico Energy, Minerals and Natural Res	ourage.	Form C-103 June 19, 2008	
District I 1625 N. French Dr, Hobbs, NM 8824		WELL API NO.		
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88	OIL CONCEDIATION DIVI		30-015-39578	
District III	1220 South St. Francis Dr	5 Indicate Type	e of Lease FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & O		
1220 S St. Francis Dr , Santa Fe, NM 87505	I	I	NMLC028793A	
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)		Burch Ke	Burch Keely Unit 18 Federal	
1. Type of Well: Oil Well Gas Well Other		8. Well Number	8. Well Number	
2. Name of Operator		O OCRID N	9. OGRID Number	
COG Operating LLC		9. OGRID Num	9. OGRID Number 229137	
3. Address of Operator		i	10. Pool name or Wildcat	
550 W. Texas Ave., Suite 100 Midland, TX 79701		Grayburg Jackso	Grayburg Jackson;SR-Q-G-SA 28509	
4. Well Location				
Unit Letter 4: 585 feet from the South line and 465 feet from the West line Section 18 Township 17S Range 30E NMPM Eddy County				
Section 18 Township 17S Range 30E NMPM Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3631' GR				
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 ALTERING CASING				
TEMPORARILY ABANDON				
PULL OR ALTER CASING				
SOWITH OLD COMMITTEE .				
OTHER: ☐ OTHER: Change Property Code ☐				
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date 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 property code changed				
From 39039 To 308086				
Effective 3/01/2012				
		_	DECEIVED	
			RECEIVED	
			APR 27 2012	
			ANACOD ADTECIA	
Spud Date:	Rig Release Date:		NMOCD ARTESIA	
· ·				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE	TITLE Regula	tory Analyst DA	ΓΕ <u>04/26/12</u>	
		1		
Type or print name Rob For State Use Only	yn M. Odom E-mail address: roc	lom@concho.com PHO	ONE: <u>432-685-4332</u>	
The same of the sa				
APPROVED BY: MUSCULA TITLE DISTRIBUTION D'ATE OF DESTRE				
Conditions of Approval (if any):				