

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

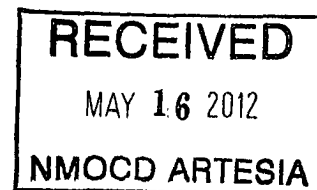
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

|                                                                                                                                                                                                                       |  |                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)         |  | WELL API NO.<br><b>30-015-40254</b>                                                                 |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>                                                                                        |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br><b>COG Operating LLC</b>                                                                                                                                                                       |  | 6. State Oil & Gas Lease No.                                                                        |
| 3. Address of Operator<br><b>550 W Texas Suite 100 Midland, TX 79701</b>                                                                                                                                              |  | 7. Lease Name or Unit Agreement Name<br><b>BR-549 State</b>                                         |
| 4. Well Location<br>Unit Letter <b>D</b> : <b>205</b> feet from the <b>NORTH</b> line and <b>180</b> feet from the <b>WEST</b> line<br>Section <b>27</b> Township <b>17S</b> Range <b>29E</b> NMPM County <b>EDDY</b> |  | 8. Well Number <b>5</b>                                                                             |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br><b>3545'</b>                                                                                                                                                    |  | 9. OGRID Number<br><b>229137</b>                                                                    |
|                                                                                                                                                                                                                       |  | 10. Pool name or Wildcat<br><b>Bear Grass Draw; Glor-Yeso 97534</b>                                 |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

|                                                                                                                                                                                                                                                                                             |                                           |                                                  |                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|------------------------------------------|
| <b>NOTICE OF INTENTION TO:</b>                                                                                                                                                                                                                                                              |                                           | <b>SUBSEQUENT REPORT OF:</b>                     |                                          |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                                                                                                                                                                                                                              | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>                                                                                                                                                                                                                                                | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>                                                                                                                                                                                                                                               | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |                                          |
| DOWNHOLE COMMINGLE <input type="checkbox"/>                                                                                                                                                                                                                                                 |                                           |                                                  |                                          |
| OTHER: <b>Change Cement</b> <input checked="" type="checkbox"/>                                                                                                                                                                                                                             |                                           | OTHER: <input type="checkbox"/>                  |                                          |
| 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. |                                           |                                                  |                                          |

**COG respectfully requests to change the cement to: 400 sx int cmt and 900 sx prod cmt.**



Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE  TITLE **Permitting Tech** DATE **5/16/2012**

Type or print name **Kelly J. Holly** E-mail address: **kholly@concho.com** PHONE: **432-685-4384**  
**For State Use Only**

APPROVED BY:  TITLE **Geologist** DATE **5/15/2012**  
Conditions of Approval (if any):