Submit 1 Copy To Appropriate District State of New Mexico Form C-103 Office Revised August 1, 2011 Energy, Minerals and Natural Resources <u>District 1</u> – (575) 393-6161 WELL API NO. 1625 N French Dr., Hobbs, NM 88240 30-015-39522 <u>District II</u> – (575) 748-1283 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 5. Indicate Type of Lease <u>District III</u> - (505) 334-6178 1220 South St. Francis Dr. STATE | 1000 Rio Brazos Rd , Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM Federal Lease # NMLC028784B 7. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS (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 Burch Keely Unit PROPOSALS) 8. Well Number 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator 9. OGRID Number COG Operating, LLC 229137 10. Pool name or Wildcat 3. Address of Operator Grayburg Jackson; SR-Q-GB-SA 28509 550 W. Texas Ave., Suite 100, Midland, TX 79701 4. Well Location feet from the North line and <u>1000</u> Unit Letter 330 feet from the West 18 Township 17S Range 30E **NMPM** Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3649' 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PLUG AND ABANDON PERFORM REMEDIAL WORK □ REMEDIAL WORK ALTERING CASING □ TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. P AND A MULTIPLE COMPL  $\Box$ CASING/CEMENT JOB PULL OR ALTER CASING DOWNHOLE COMMINGLE OTHER: Pool Change OTHER: 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 Operating LLC respectfully request to have this wells' pool changed from the Grayburg Jackson; SR-O-GB-SA (28509) to the Burch Keely; Glorieta-Upper Yeso (97918) Per NMOCD order R-10067-E. RECEIVED MAY **21** 2012 **NMOCD ARTESIA** 3/10/12 3/17/12 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 ' Regulatory Analyst TITLE DATE 5/17/12 Type or print name E-mail address: cjackson@concho.com Chasity Jackson PHONE: 432-686-3087 For State Use Only APPROVED BY:

Conditions of Approval (if any):