Submit 1 Copy To Appropriate District Office	State of New Me	xico .	Form C-103
District I – (575) 393-6161	Energy, Minerals and Natu	ral Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283			WELL API NO.
811 S. First St., Artesia, NM 88210			30-015-37936 5. Indicate Type of Lease
District III - (505) 334-6178	1220 South St. Fran	icis Dr.	STATE FEE
1000 Rio Brazos Rd , Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87	7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM			İ
87505 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.)			Maple State
1. Type of Well: Oil Well Gas Well Other			8. Well Number 11
2. Name of Operator			9. OGRID Number
COG Operating, LLC			229137
3. Address of Operator			10. Pool name or Wildcat 96836
550 W. Texas Ave., Suite 100, Midland, TX 79701		Red Lake; Glorieta-Yeso, Northeast	
4. Well Location			
Unit Letter $E/2$ : 1650' feet from the North line and 330' feet from the West line			
Section 30	Township 17S Range	28E	NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3554' GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Bata			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
			<del>_</del>
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A			
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMEN	I JOB 🔲
DOWN TOLL COMMINGLE			:
	APD Extension ⊠	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.			
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COG Operating LLC respectfully requests permission			
for a two year extension to this APD RECEIVED			
scheduled to expire 6/22/2012.			
Appenie Por age was April GRAMATAN JUN 18 2012			
Approve for one year New expression NMOCD ARTESIA			
	dAte is 6/2/201	2	THINOCD ARTESIA
	700 - 11.	·	
Spud Date:	Rig Release Da	ite:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
$\mathcal{M}$			
SIGNATURE TITLE Regulatory Analyst DATE 6/15/12			
Megulatory Analyst Dille 9/15/12			
Type or print name Robyn M. Odom E-mail address: Rodom@concho.com PHONE: (432) 685-4385			
For State Use Only			
APPROVED BY // SMOULD TITLE L'ON/ DOCT			
APPROVED BY: / ONGOVED TITLE OFFICE OF Approved (if any):			
Conditions of Approval (if any):			