

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

|   |  |
|---|--|
| WELL API NO.<br><b>30-015-39040</b>   |  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |  |
| 6. State Oil & Gas Lease No.  |  |
| 7. Lease Name or Unit Agreement Name<br><b>GJ West Coop Unit</b>                                    |  |
| 8. Well Number <b>275</b>   |  |
| 9. OGRID Number<br><b>229137</b>  |  |
| 10. Pool name or Wildcat <b>96210</b><br><b>Empire; Glorieta-Yeso</b>                               |  |

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 PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

**COG Operating, LLC**

3. Address of Operator

**One Concho Center, 600 W. Illinois Ave., Midland, TX 79701**

4. Well Location

Unit Letter **M** : **1162'** feet from the **South** line and **330'** feet from the **West** line  
Section **27** Township **17S** Range **29E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3532' GR**

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER:

**APD Extension**

☒

SUBSEQUENT REPORT OF:

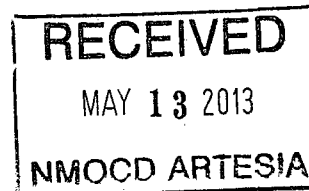
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

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.

*1 yr.*  
COG Operating LLC respectfully requests permission  
for a ~~two year~~ extension to this APD  
scheduled to expire 5/16/2013.



EXTENSION GRANTED. NEW

EXPIRATION DATE **5/16/2014**

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 *Robyn M. Odom*

TITLE **Regulatory Analyst**

DATE **5/10/13**

Type or print name: **Robyn M. Odom**

E-mail address: **Rodom@concho.com**

PHONE: **(432) 685-4385**

For State Use Only

APPROVED BY: *T. C. Shepard*

TITLE *Geologist*

DATE **5/13/2013**

Conditions of Approval (if any):

*AV*