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Submit 1 Copy To Appropriate District State of New Mexico Office	Form C-103
District I - (575) 393-6161 Energy, Minerals and Natural Resour	ces Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISIO	N <u>30-015-40418</u>
<u>District III</u> – (505) 334-6178 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	STATE FEE
	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Ouimet State Com
PROPOSALS.) 1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other	8. Well Number <b>3H</b>
2. Name of Operator	9. OGRID Number
COG Operating LLC	229137
3. Address of Operator	10. Pool name or Wildcat
One Concho Center, 600 W. Illinois Ave., Midland, TX 79701	Empire; Glorieta-Yeso, East 96610
4. Well Location	,, _,
	and <u>150</u> feet from the <u>East</u> line
	9E NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3664' GR	
12. Check Appropriate Box to Indicate Nature of N	Jotice, Report or Other Data
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK 🗌 PLUG AND ABANDON 🗌 🛛 REMEDIAL WORK 🔅 ALTERING CASING 🗌	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A	
PULL OR ALTER CASING I MULTIPLE COMPL I CASING/CEMENT JOB	
OTHER: APD Extension 🛛 OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent de	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Mult	tiple Completions: Attach wellbore diagram of
proposed completion or recompletion.	
Jy R.	
COG Operating LLC respectfully requests	
a two year extension to this APD	
scheduled to expire 06/25/2014. JUN <b>06</b> 2014	
scheduled to expire ou/25/201	
inal Extension Approved ending	NMOCD ARTESIA
1-25-2015	
10 05 0015.	
Spud Date: Rig Release Date:	
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I hereby certify that the information above is true and complete to the best of my kr	powledge and belief
Thereby certify that the information above is true and complete to the best of my kit	lowledge and benef.
SIGNATURE	Analyst DATE <u>06/05/2014</u>
Type or pfint name Robyn M-Odom, E-mail address: Rodom	@concho.com PHONE: <u>432-685-4385</u>
For State Use Only	
APPROVED BY: / C C J// JULA TITLE	eologist" DATE 6 - 2014
Conditions of Approval (if any):	