NM OIL CONSERVATION Submit One Copy To Appropriate DiagetesIA DISTRICT Office District I IIIN 3 DEALLY, Minerals and Natural Resources	
Submit One Copy To Appropriate DispiteSIA DISTRICT	Earm C 102
Submit One Copy To Appropriate Diameter A District State of New Mexico Office District I JUN 3 0Eaergy, Minerals and Natural Resources	Form C-103 Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240	WELL API NO. 30-015-40646
811 S. First St., Artesia, NM 88210 RECEIVED CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410Santa Fe, NM 87505District IVSanta Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
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.)	7. Lease Name or Unit Agreement Name GJ West Coop Unit
1. Type of Well: Oil Well Gas Well Other	8. Well Number 293H
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	GJ;7RVS-QN-GB-Glor-Yeso
4. Well Location	
Unit Letter <u>L</u> : <u>1950</u> feet from the South line and <u>990</u> feet from the <u>West</u> line	
Section <u>27</u> Township <u>17S</u> Range <u>29E</u> NMPM County Eddy	
3532 GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
	ady for OCD inspection after P&A
<ul> <li>All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.</li> <li>Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.</li> <li>A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the</li> </ul>	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR	
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATIC PERMANENTLY STAMPED ON THE MARKER'S SURFACE.	ON HAS BEEN WELDED OR
<u>TERMANENTET STAMLED ON THE MARKER SSURFACE.</u>	
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment.	
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.	
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with	
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, prod	uction equipment and junk have been removed
from lease and well location.	
All metal bolts and other materials have been removed. Portable bases have been remote to be removed.)	ved. (Poured onsite concrete bases do not have
All other environmental concerns have been addressed as per OCD rules.	
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-	
retrieved flow lines and pipelines.	
If this is a one-well lease or last remaining well on lease: all electrical service poles and	d lines have been removed from lease and well
location, except for utility's distribution infrastructure.	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
$7$ $\Lambda$	
SIGNATURE <u>3</u> . <u>J</u> . <u>TITLE_Regulatory Analyst</u>	DATE _6/27/14
TYPE OR PRINT NAME _Brian Maioirno E-MAIL: _bmaiorino@concho For State Use Only	.com PHONE: _432-221-0467
APPROVED BY: Norme Oracles TITLE Completioner Otherest DATE 1/2/14	
OK TO Kellease -	

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