Submit 1 Copy To Appropriate District Office	state of New Me	State of New Mexico		Form C-103	
District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013		
1625 N. French Dr., Hobbs, NM 8824			WELL API NO.		
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION	OIL CONSERVATION DIVISION		30-015-40657  5. Indicate Type of Lease	
District III – (505) 334-6178	1220 South St. Fran	1220 South St. Francis Dr.		STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 8741 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		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 A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Empire 23 State			
1. Type of Well: Oil Well	1. Type of Well: Oil Well Gas Well Other		8. Well Number 7		
2. Name of Operator  COG Operating LLC			9. OGRID Number 229137		
3. Address of Operator			10. Pool name or Wildcat		
One Concho Center, 600 W. Illinois Ave., Midland, Tx 79701		Empire; Glorieta-Ye	I		
.4. Well Location					
Unit Letter D	feet from the North		90' feet from the	West line	
Section 23	Township 17S I	Range 28E		unty EDDY	
	3644				
12. Che	ck Appropriate Box to Indicate N	ature of Notice,	Report or Other Data		
NOTICE OF	NOTICE OF INTENTION TO: SUBSEQUENT REP				
PERFORM REMEDIAL WORK	<del>_</del>	<u> </u>			
TEMPORARILY ABANDON	☐ CHANGE PLANS ☐	COMMENCE DR	<del></del> -	) A 🔲 .	
PULL OR ALTER CASING	☐ MULTIPLE COMPL ☐	CASING/CEMEN	T JOB		
DOWNHOLE COMMINGLE					
CLOSED-LOOP SYSTEM OTHER:	☐ APD Extension ⊠	OTHER:	•	П	
	ompleted operations. (Clearly state all p		d give pertinent dates, inclu	iding estimated date	
of starting any propose	d work). SEE RULE 19.15.7.14 NMAC				
proposed completion o	r recompletion.				
:				,	
	COG Operating LLC res			** **	
	a two year extensio scheduled to expire		NM O	IL CONSERVATION	
Final Extension Approved endir			,	ARTESIA DISTRICT	
15 9-11-2015				SEP 0 3 2014	
1 /11 000				DECEN/ED	
1				RECEIVED	
			•	•	
Spud Date:	Rig Release Da	ite:			
1		· · · · · · · · · · · · · · · · · · ·	_		
I hereby certify that the informa	tion above is true and complete to the be	est of my knowledg	e and belief.		
SIGNATURE	TITLE F	Regulatory Analyst	DATE	09/02/2014	
Type or print name Robyn	M. Odom E-mail address:	Rodom@conch	o com DIJONE.	122 685 1285	
For State Use Only	? Coon E-man address:	Nodom@conen	o.comPHONE: _4	432-685-4385	
//	(hannel	"Geni	ogist" DATE	7-2-2114	
APPROVED BY: (if any)	. Of 1910019 TITLE	<u> </u>	Desc Date	3 W/	