

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  
August 1, 2011

OIL CONSERVATION DIVISION  
1220 South 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.)		WELL API NO. <b>30-015-10825</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>COG Operating LLC</b>		6. State Oil & Gas Lease No. <b>B-514</b>
3. Address of Operator <b>600 W Illinois, Midland, TX 79701</b>		7. Lease Name or Unit Agreement Name <b>GJ West-Coop Unit</b>
4. Well Location Unit Letter <b>C</b> : <b>2173</b> feet from the <b>W</b> line and <b>467</b> feet from the <b>N</b> line Section <b>28</b> Township <b>17S</b> Range <b>29E</b> NMPM County <b>Eddy</b>		8. Well Number <b>19</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3559</b>		9. OGRID Number <b>229137</b>
		10. Pool name or Wildcat <b>Grayburg Jackson</b>

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: ☐

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.

08/26/15 MIRU Plugging equipment. Established injection rate into perfs of 1.5 bbls/min @ 800 psi. Sqz'd 40 sx cement and displaced to 2550'. WOC. 08/27/15 ND wellhead. NU BOP. POH w/ tbg and packer. RIH and tagged plug @ 2512'. Pressured up on csg to 500 psi. Circulated hole w/ mud laden fluid. POH. Perf'd csg @ 900'. Set packer @ 631' and Sqz'd 45 sx cement w/ 3 % CACL. Displaced to 780'. WOC. Tagged plug @ 794'. Perf'd csg @ 420'. Set packer @ 136'. Sqz'd 45 sx cement and displaced to 300'. WOC. 08/28/15 Tagged plug @ 306'. Perf'd csg @ 100'. Sqz'd 25 sx cement w/ 3% CACL and 1 bag of LCM. WOC. 08/31/15 Open well and on vacuum. Re-Sqz 25 sx cement w/ 1 bag of LCM and 3% CACL. WOC. Tagged plug @ 307'. Pumped 1 sack of cotton seed oil, Sqz'd 50 sx cement and circulated cement to surface. Verified cement at surface. Rigged down and moved off. 09/10/15 Moved in welder and backhoe. Dug out cellar. Cut off wellhead. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Removed deadmen. Cleaned location and moved off.

Spud Date:

Rig Release Date:

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt  
of C-103 (Subsequent Report of Well Plugging)  
which may be found at OCD Web Page under  
Forms. [www.emnrd.state.nm.us/oed](http://www.emnrd.state.nm.us/oed).

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Bon Montgomery TITLE Agent DATE 9-11-15  
Type or print name Bon Montgomery E-mail address bon@bonandassociates.com PHONE: 432-580-7161  
**For State Use Only**  
APPROVED BY: Dr. B. Spewiso TITLE Dr. B. Spewiso DATE 9/15/2015  
Conditions of Approval (if any):

\* Submit Subsequent C-103