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Submit I Copy To Appropriate District Office	State of New Mexic	0	Form C-103
District I	Energy, Minerals and Natural 1	Resources	October 13, 2009
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-015-41862
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE
District IV	Santa Fe, NM 87505	5	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
	ES AND REPORTS ON WELLS	***************************************	7. Lease Name or Unit Agreement Name
	ALS TO DRILL OR TO DEEPEN OR PLUG B ATION FOR PERMIT" (FORM C-101) FOR SU		Daisy 24 Fee Com
PROPOSALS.)	NM OIL CONSI	ERVATION	8. Well Number
	Gas Well Other ARTESIA DIS	STRICT	6H
2. Name of Operator	DEC 01	2017	9. OGRID Number
COG Operating LLC 3. Address of Operator		2011	229137 10. Pool name or Wildcat
2208 W. Main Street, Artesia, N	M 88210	1 500 575	Hay Hollow; Bone Spring, North
4. Well Location	M 88210 RECEIV	/ED	I may nonow, bone opinig, nonin
	915' feet from the <u>North</u> line	and 1675'	feet from the East line
		27E	
Section 24	Township         25S         Range           11. Elevation (Show whether DR, RK)		NMPM Eddy County
	3070.9'	<i>D</i> , <i>N</i> 1, <i>ON</i> , <i>eic</i> . <i>j</i>	
o Charle Arnur - rists Day to I	- linet- Notice - Chieting Down	4 Oth D-	A _
2. Check Appropriate Box to i	ndicate Nature of Notice, Repor	t or Other Da	112
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:
		DMMENCE DRI	
PULL OR ALTER CASING	= 1	SING/CEMEN	
OTHER: APD Extension		THER:	
			e pertinent dates, including estimated date of
	E RULE 19.15.7.14 NMAC. For Mult	tiple Completion	ns: Attach wellbore diagram of proposed
completion or recompletion.	,		
	l,		
COG Operating LLC respectfully req	uests approval for a $\not z$ year extension o	n the above refe	erenced APD.
	·		et 213.3018
C102 Attached.			D <sup>L</sup> D
uppres 12-13-2017			AY SID
			My 2 AD
		New	/ /0
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Spud Date:	Rig Release Date:		
spud Date.	Kig Kelease Date.		
L handhar annsita shas sha in Cannasian a	have in the and an unlate to the bast of	C.m. Im and a	
I hereby certify that the information a	bove is true and complete to the best of $\mathcal{A}$	n my knowiedg	e and beller.
SIGNATURE CUNUS 4	LOSCHER_ TITLE:Regula	atory Assistant	DATE: <u>11/30/2017</u>
Type or print name: <u>Genesis Va</u> For State Use Only	squez E-mail address: gg	arzaperez(@)con	<u>cho.com</u> PHONE: <u>(575) 748-6926</u>
· A	TITLE STAT	$\gamma$ .	
APPROVED BY:	Clas TITLE S/AF	T 175-	DATE 12-15-17
Conditions of Approval (if any):		V	
22.11			
(J.c.			

