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1220 S. Franci Dr., Sana Fe, NM Final Action Stress and Fe, NM 12305 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM OR PROFESALS TO BURLO IN ON PERMIT (FORM C-10) FOR SUCH PROFESALS 7. Lease Name or Unit Agreement Name MYOX 21 State Com 1. Type of Well: Oil Well Well & Gas Well Other 8. Well Number 8. Well Number 2. Name of Operator COG Operator Dependent LLC 9. OGRID Number 229137 3. Address of Operator COG Operator 9. Orall Number 22011 4. Well Location 10. Pool name or Wildat San Lorenzo, Bone Spring 4. Well Location 11. Elevation (Slow whether D.R. R.R. R.R. GR, etc.) 22012 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: 2059.2 GR SUBSEQUENT REPORT OF: REMEDIAL WORK PLANS PERFORM REMEDIAL WORK PLANS CHANG PLANS COMMENCE DRILLING OPNS. PAND A PULL OR ALTER CASING MULTIPLE COMPL OTHER: Completion Operations San Jerrenzo, Bone Spring 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent detas, including estimated date of starting any proposed overly. SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Ctarty state all pertinent details, and give pertinent detas, including estimated date of starting any proposed work. SEE RULE 19.15.7.14 NMAC. For				Dr.				
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3/5/18 Set 2 7/8" 6.5# L-80 tbg @ 7736' & pkr @ 7719'. Installed gas-lift system. 3/8/18 Began flowing back & testing. Spud Date: 6/5/17 Rig Release Date: 6/29/17 I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE: Regulatory Analyst DATE: 3/14/18 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946 For State Use Only APPROVED BY: MALLANCE TITLE: Methods March 2018	2/14/18 to 2/26/18 Perf 8373-17894	' (1828). Acdz w/188,4	96 gal 7 1/2% ac	cid. Frac w/1	9,374,900# sand &	& 18,179,826 gal fluid.		
3/8/18 Began flowing back & testing. Spud Date: 6/5/17 Rig Release Date: 6/29/17 I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE: Regulatory Analyst DATE: Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946 For State Use Only TITLE: APPROVED BY: Mathematical M	3/1/18 to 3/4/18 Drilled out frac plug	gs. Clean down to CBP	° @ 17975'.					
Spud Date: 6/5/17 Rig Release Date: 6/29/17 I hereby certify that the information above is true and complete to the best of my knowledge and belief. Image: SignATURE	3/5/18 Set 2 7/8" 6.5# L-80 tbg @ 7	736' & pkr @ 7719'. If	nstalled gas-lift s	ystem.				
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APPROVED BY: At an ITTLE Staff Mr. DATE 4-2-18	For State Use Only							
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District I 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III

1000 Rio Brazos Road, Aztec, NM 87410

Phone: (505) 334-6178 Fax: (505) 334-6170 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico OIL CONSERVATION Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 28 2018 1220 South St. Francis Dr. Santa Fe, NM 87505 RECEIVED

Revised August 1, 2011 Submit one copy to appropriate **District Office**

> AMENDED REPORT (As Drilled)

WELL LOCATION AND ACREAGE DEDICATION PLAT

· A	PI Number	r		² Pool Code	e		³ Pool Na	me	
30-	015-4174	43		53600		San Lorenzo; Bone Spring			
⁴ Property C	Code	⁵ Property Name ⁶ Well Number							⁶ Well Number
38521		MYOX 21 State Com 4H						4H	
⁷ OGRID N	۱o.	⁸ Operator Name ⁹ Elevation							⁹ Elevation
229137	7	COG Operating LLC 2959.2' GR						2959.2' GR	
¹⁰ Surface Location									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	he North/South line Feet from the East/West line Count		ine County	
Р	21	25S	28E		190	South	380	East	Eddy
¹¹ Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line County	
A	16	258	28E		341	North	382	East	Eddy
¹² Dedicated Acres 320	¹³ Joint or	r Infill ¹⁴ C	onsolidation	Code ¹⁵ Or	der No.				•

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16			₩ 382'	¹⁷ OPERATOR CERTIFICATION
				I hereby certify that the information contained herein is true and complete to the
			BHL	best of my knowledge and belief, and that this organization either owns a working
			<u> </u>	interest or unleased mineral interest in the land including the proposed bottom
			i	hole location or has a right to drill this well at this location pursuant to a contract
				with an owner of such a mineral or working interest, or to a voluntary pooling
				agreement or a compulsory pooling order heretofore entered by the division.
				3/14/18
				Signature Date
				Stormi Davis
				Printed Name
		Producing Area 8373-17950'		sdavis@concho.com
		83/3-1/950		E-mail Address
Sec 16-T25S-R28H	E			
Sec 21-T25S-R28H	<u> </u>			¹⁸ SURVEYOR CERTIFICATION
				I hereby certify that the well location shown on this plat was
				plotted from field notes of actual surveys made by me or under
			<u>! ; </u>	my supervision, and that the same is true and correct to the
				best of my belief.
			. !!	Date of Survey
				Signature and Seal of Professional Surveyor:
				REFER TO ORIGINAL PLAT
				Certificate Number
			SHL	
			· · · 380'	
			6 6	