

Submit 3 Copies to Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 May 27, 2004

WELL API NO. **30-015-35725**

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
**G J West Coop Unit**

8. Well Number **174**

9. OGRID Number  
**229137**

10. Pool name or Wildcat **97558**  
**GJ; 7RVS-QN-GB-GLORIETA-YESO**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3559' GR**

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.)

1. Type of Well: Oil Well  Gas Well  Other  **OCT 11 2007**

2. Name of Operator  
**COG Operating LLC** **OCD-ARTESIA**

3. Address of Operator  
**550 W. Texas Ave., Suite 1300** **Midland, TX 79701**

4. Well Location  
 Unit Letter **I** : **2310** feet from the **South** line and **330** feet from the **East** line  
 Section **21** Township **17S** Range **29E** NMPM County **EDDY**

Pit or Below-grade Tank Application  or Closure

Pit type **DRILLING** Depth to Groundwater **110'** Distance from nearest fresh water well **1000'** Distance from nearest surface water **1000**

Pit Liner Thickness: **12 mil** Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <b>Change casing program</b> <input checked="" type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Type	Hole Size	Casing Type	Casing Weight/ft.	Setting Depth	Sacks of Cement	Estimated TOC
Surf.	12.250	8.625	24	300	350	0
Prod.	7.875	5.50	17	5600	1200	0

COG proposes to drill 12 1/4" hole to 300' set 8 5/8" casing and cement to surface.  
 Drill 7 7/8" hole to 5600', test Blinebry formation, run 5 1/2" casing and cement to surface.

Note: On production string, a fluid caliper will be run and will figure cement with 25% excess & attempt to circ to surface.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Phyllis A. Edwards TITLE Regulatory Analyst DATE 10-10-07

Type or print name **Phyllis A. Edwards** E-mail address: **pedwards@conchoresources.com** Telephone No. **432-685-4340**

**For State Use Only**  
 APPROVED BY: BRYAN G. ARRANT TITLE DISTRICT II GEOLOGIST DATE OCT 12 2007  
 Conditions of Approval (if any): \_\_\_\_\_