

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

FORM C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-35985
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name G J WEST COOP UNIT
8. Well Number 178
9. OGRID Number 229137
10. Pool name or Wildcat 97558 GJ; 7RVS-QN-GB-GLORIETA-YESO

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

2. Name of Operator
COG Operating LLC

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

4. Well Location
 Unit Letter **H** : **1650'** feet from the **North** line and **330'** feet from the **East** line
 Section **16** Township **17S** Range **29E** NMPM County **EDDY**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3558' GR

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 ml** Below-Grade Tank: Volume **bbbs**; Construction Material

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

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

COG Operating LLC respectfully requests permission to change the casing program to:

Type	Hole Size	Casing Type	Casing Weight/ft.	Setting Depth	Sacks of Cement	Est TOC
Surf	17.5	13.375	48	300	350	0
Interm	12.25	8.625	24	850	600	0
Prod	7.875	5.50	17	5450	1200	0

COG proposes to drill 17-1/2" hole to 300' w/ fresh water mud system, wt. 8.5, vis 28, set 13-3/8" casing & cement to surface. Drill 12 1/4" hole to 850' w/ brine mud system, wt 10, vis 30, set 8-5/8" casing & cement to surface. Drill 7 7/8" hole to 5450' w/ cut brine mud system, wt 9.1, vis 29-32, test Yeso formation and 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 Edwards TITLE Regulatory Analyst DATE 2-13-08

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

For State Use Only **BRYAN G. ARRANT**
 APPROVED BY: DISTRICT II GEOLOGIST TITLE _____ DATE **FEB 13 2008**

Conditions of Approval (if any):