

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

Form C-103
May 27, 2004

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



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| WELL API NO. 30-015-35767 |
| Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name Houma State |
| 8. Well 4 |
| 9. OGRID Number 229137 |
| 10. Pool name or Wildcat Loco Hills; Glorieta-Yeso 96718 |

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|---|--|
| 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | |
| 2. Name of Operator COG Operating LLC | |
| 3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, TX 79701 | |
| Well Location Unit Letter <u>E</u> : <u>2310</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>West</u> line Section <u>16</u> Township <u>17S</u> Range <u>30E</u> NMPM County <u>Eddy</u> | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3680' GR | |

| | |
|--|--|
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> | |
| Pit type | Depth to Groundwater |
| Pit Liner Thickness: | Below-Grade Tank: Volume |
| | Distance from nearest fresh water well |
| | Distance from nearest surface water |
| | 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: <input type="checkbox"/> | | OTHER: Addition of Paddock Perfs <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.

03-11-08 MIRU POOH w/rods & pump.
03-12-08 POOH w/tbg. RIH w/Rbp & set @ 4800'.
03-13-08 Perf @ 4338'-4647', 1 SPF, 33 holes.
03-15-08 Acidize w/3000 gal 15% HCL acid. Frac w/114,836 gals Lighting 2000; 114,836# 16/30 white sand; 15,000# 16/30 SiberProp; flush w/4,150 gal 20# linear gel. All pumped via 5 1/2" 17# csg.
03-17-08 Release RBP & POOH.
03-18-08 RIH w/177 jts 2 7/8" tbg, SN @ 5759'.
03-19-08 RIH w/ 2.5"x2"x20' + 2' RHTC pump & rods. Hang well on.

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 Carol Ann Lance TITLE Regulatory Analyst DATE 03/31/2008

Type or print name Carol Ann Lance E-mail address: clance@conchoresources.com Telephone No. 432-685-4395
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____

Accepted for record - NMOCD