

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

RM

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

WELL API NO. 30-015-37177
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 GJ West Coop Unit
8. Well Number 230
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

Well Location
Unit Letter J : 2310 feet from the South line and 2310 feet from the East line
Section 16 Township 17S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3569 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; 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"/>		<input checked="" type="checkbox"/> OTHER: Completion	

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.

09/16/09 Perf @ 5100-5300 w/ 1 SPF, 29 holes. Acidize w/3,500 gals acid. Frac w/125,142 gals gel, 149,740# 16/30 Ottawa sand, 30,248# 16/30 Siberprop sand.
Set plug @ 5060. Perf @ 4830-5030 w/1 SPF, 26 holes. Acidize w/3,500 gals acid. Frac w/123,955 gals gel, 150,181# 16/30 Ottawa sand, 29,821# 16/30 Siberprop sand.
Set plug @ 4780. Perf @ 4550-4750 w/ 1 SPF, 26 holes. Acidize w/3,500 gals acid. Frac w/124,300 gals gel, 148572# 16/30 Ottawa sand, 29,980# 16/30 Siberprop sand.
Set plug @ 4270. Perf @ 3992-4240 w/1 SPF, 29 holes. Acidize w/2,500 gals acid. Frac w/ 104,243 gals gel, 98,594# 16/30 Ottawa sand, 20,806# 16/30 Siberprop sand.
09/21/09 Drill out plugs. Clean out to PBTD 5449.
09/22/09 RIH w/168jts 2-7/8" J55 tbg, SN @ 5091. RIH w/ 2.5"x2"x24' RHTC pump. Hang on well.

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 C Jackson TITLE Agent for COG DATE 10/14/09

Type or print name Chasity Jackson E-mail address: cjackson@conchoresources.com Telephone No. 432-686-3087
For State Use Only

APPROVED BY: [Signature] TITLE Geologist DATE 10/23/09
Conditions of Approval (if any): _____