| Submit 1 Copy To Appropriate District Office  | State of New Mexico                     |   | Form C-103                                       |  |  |
|---|---|---|--|--|--|
| <u>District I</u><br>1625 N. French Dr., Hobbs, NM 88240  | Energy, Minerals and Natural Resources  |   | October 13, 2009 WELL API NO.                    |  |  |
| <u>District II</u><br>1301 W. Grand Ave., Artesia, NM 88210   | OIL CONSERVATION DIVISION               |   | 30-025-52372  5. Indicate Type of Lease          |  |  |
| <u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410   | 1220 South St. Francis Dr.              |   | STATE   FEE                                      |  |  |
| District IV   | Santa Fe, NM 87505                      |   | e Oil & Gas Lease No.                            |  |  |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  |   |   |  |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS   |   |   | se Name or Unit Agreement Name                   |  |  |
| (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   |   | SUCH La                                 | Eata Fajita State Com                            |  |  |
| PROPOSALS.)  1. Type of Well: Oil Well  | Dil Well ⊠ Gas Well □ Other             |   | l Number<br>608H                                 |  |  |
| 2. Name of Operator   |   |   | RID Number                                       |  |  |
| COG Operating LLC   |   |   | 229137   |  |  |
| 3. Address of Operator  |   |   | ol name or Wildcat<br>25 G-09 S243310P; Wolfcamp |  |  |
| 2208 W. Main Street. Artes  | sia NM 88210                            | VVO-0                                   | 23 G-09 3243310F, Wollcamp                       |  |  |
| 4. Well Location  Unit Letter M : 640 feet from the South line and 1250 feet from the West line   |   |   |  |  |  |
| Section 8   | Township 24S Range                      | 33E NMPM                                |  |  |  |
|   | 11. Elevation (Show whether DR, RK      |   | ,  |  |  |
|   | 3585.5' GF                              | }                                       |  |  |  |
| 12. Check Appropriate Box to  | Indicate Nature of Notice, Repo         | rt or Other Data                        |  |  |  |
| NOTICE OF IN  | ITENTION TO:                            | SUBSEQUE                                | ENT REPORT OF:                                   |  |  |
|   |   | EMEDIAL WORK                            | ☐ ALTERING CASING ☐                              |  |  |
|   |   | OMMENCE DRILLING OI<br>ASING/CEMENT JOB | PNS.□ P AND A □                                  |  |  |
| PULL OR ALTER CASING DOWNHOLE COMMINGLE   | MULTIPLE COMPL C                        | ASING/CEMENT JOB                        | Ш  |  |  |
| OTHER:  | 0                                       | THER:                                   | П  |  |  |
|   |   |   |  |  |  |
| 12 Describe proposed or completed   | operations (Clearly state all pertinent | details and give pertiner               | nt dates including estimated date of             |  |  |
| 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed |   |   |  |  |  |
| completion or recompletion.   |   |   |  |  |  |
|   |   |   |  |  |  |
| COG Operating LLC, respectfully requests approval to withdraw the APD for the above referenced well.  |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
| Spud Date:  | Rig Release Date:                       |   |  |  |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |   |   |  |  |  |
| SIGNATURE Mayte   | Reyes TITLE: Senio                      | or Regulatory Coordin                   | nator DATE: <u>5/8/2024</u>                      |  |  |
|   | 0                                       |   |  |  |  |
| Type or print name: Mayte Reye<br>For State Use Only  | E-mail address:                         | mayte.x.reyes@cop.com                   | PHONE: <u>575-365-8884</u>                       |  |  |
| APPROVED BY:  | TITLE                                   |   | DATE   |  |  |
| Conditions of Approval (if any):  |   |   |  |  |  |

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 Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

## **State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division** 1220 S. St Francis Dr. **Santa Fe, NM 87505**

CONDITIONS

Action 342042

## **CONDITIONS**

| Operator:          | OGRID:                                 |  |
|--------------------|--|--|
| COG OPERATING LLC  | 229137                                 |  |
| 600 W Illinois Ave | Action Number:                         |  |
| Midland, TX 79701  | 342042                                 |  |
|                    | Action Type:                           |  |
|                    | [C-103] Sub. APD Cancellation (C-103C) |  |

## CONDITIONS

| Created<br>By |      | Condition<br>Date |
|---------------|------|-------------------|
| pkautz        | None | 9/13/2024         |