

**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**  
1060 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
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**

Form C-101  
August 1, 2011  
Permit 162870

**APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE**

1. Operator Name and Address COG OPERATING LLC One Concho Center Midland, TX 79701		2. OGRID Number 229137
4. Property Code 308169		3. API Number 30-015-41142
5. Property Name SRO STATE UNIT		6. Well No. 044H

**7. Surface Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
C	17	26S	28E	C	190	N	2220	W	EDDY

**8. Proposed Bottom Hole Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
N	20	26S	28E	N	330	S	2220	W	Eddy

**9. Pool Information**

HAY HOLLOW BONE SPRING	30213
------------------------	-------

**Additional Well Information**

11. Work Type New Well	12. Well Type OIL	13. Cable Rotary	14. Lease Type State	15. Ground Level Elevation 3098
16. Multiple N	17. Proposed Depth 17804	18. Formation Bone Spring	19. Contractor	20. Spud Date 3/1/2013
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

**21. Proposed Casing and Cement Program**

Type	Hole Size	Casing Type	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	17.5	13.375	48	350	350	
Int1	12.25	9.625	36	2350	650	
Prod	7.875	5.5	17	17804	2200	2100

**Casing/Cement Program: Additional Comments**

Plan to drill a 17-1/2" hole to 350' with Fresh Water. Run 13-3/8", 48#, J-55 csg and cement to surface. Drill 12-1/4" hole to 2300' with Brine, and run 9-5/8", 36#, J55 and cement to surface. Drill 7-7/8" vertical, curve and lateral with cut brine to approx 17,804' MD. Run 5-1/2", 17#, P-110 csg and cement to 2100' in 1 stage.

**22. Proposed Blowout Prevention Program**

Type	Working Pressure	Test Pressure	Manufacturer
DoubleRam	3000	3000	Cameron

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable. Signature: Printed Name: Electronically filed by Diane Kuykendall Title: Production Reporting Mgr Email Address: dkuykendall@conchoresources.com Date: 2/21/2013      Phone: 432-683-7443		<b>OIL CONSERVATION DIVISION</b> Approved By: Randy Dade Title: District Supervisor Approved Date: 2/26/2013      Expiration Date: 2/26/2015 Conditions of Approval Attached
---	--	--

BEFORE THE OIL CONSERVATION  
 COMMISSION  
 Santa Fe, New Mexico  
 Exhibit No. 9  
 Submitted by: COG OPERATING LLC  
 Hearing Date: February 28, 2017

BEFORE THE OIL CONSERVATION  
 DIVISION  
 Santa Fe, New Mexico  
 Exhibit No.9  
 Submitted by: COG Operating LLC  
 Hearing Date: May 4, 2016

DISTRICT I  
1000 N. FRANKLIN DR., SUITE 200, ALBUQUERQUE, NM 87102

DISTRICT II  
1801 N. GRAND AVENUE, ALBUQUERQUE, NM 87102

DISTRICT III  
1000 RIO BRAZOS RD., ALBUQUERQUE, NM 87102

DISTRICT IV  
11885 S. ST. FRANCIS DR., SANTA FE, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION  
11885 SOUTH ST FRANCIS DR  
Santa Fe, New Mexico 87505



Form C-102  
Revised July 12, 2010  
Oil Conservation District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number 30-015-41142	Pool Code 30215	Pool Name Hay Hollow, Bone Spring
Property Code 308169	Property Name SRO STATE UNIT	Well Number 44H
OGED No. 229137	Operator Name COG OPERATING LLC	Elevation 3098

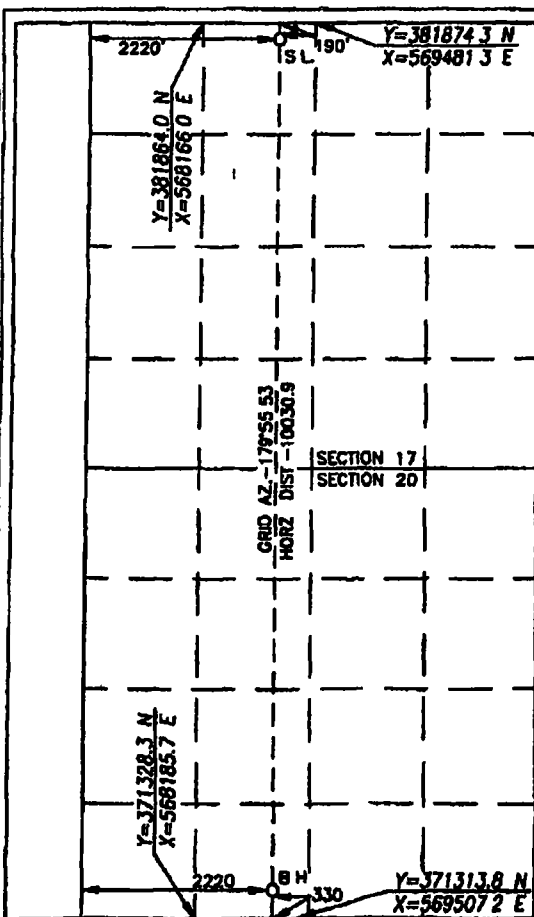
Surface Location

UL or lot No	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	17	26-S	28-E		190	NORTH	2220	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	20	26-S	28-E		330	SOUTH	2220	WEST	EDDY
Dedicated Acres 320		Joint or Infill		Consolidation Code		Order No.			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p><b>SURFACE LOCATION</b> Y=381678.8 N X=569071.5 E LAT = 32.049154 N LONG = 104.110399 W</p> <p><b>PROPOSED BOTTOM HOLE LOCATION</b> Y=371648.1 N X=569083.3 E LAT = 32.021579 N LONG = 104.110428 W</p> <p>SCALE - 1 = 2000</p>	<p><b>OPERATOR CERTIFICATION</b></p> <p>I hereby certify that the information herein is true and complete to the best of my knowledge and belief and that this organization either owns working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p>Signature: <i>Melanie Harker</i> Date: 2/26/12 Printed Name: Melanie Harker</p> <p><b>SURVEYOR CERTIFICATION</b></p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>JULY 24 2012</p> <p>Date Surveyed: <i>7/24/12</i> Signature: <i>Chad Harker</i> Professional Surveyor: <i>17777</i></p> <p>Certified: <i>CHAD HARKER</i> 17777 LA 42-2012</p>
--	--	--

Submit 1 Copy To Appropriate District Office  
District I - (575) 393 6161  
1625 N French Dr Hobbs NM 88240  
District II - (575) 748 1283  
1000 Rio Brazos Rd Aztec NM 87410  
District III - (505) 334-6178  
1220 S St Francis Dr Santa Fe NM 87505  
District IV - (505) 476 3460  
1220 S St Francis Dr Santa Fe NM 87505

State of New Mexico  
Energy Minerals and Natural Resources

Form C 103  
Revised August 1 2011

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

WELL API NO	30-015-41142
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	SRO STATE UNIT
8 Well Number	#044H
9 OGRID Number	229137
10 Pool name or Wildcat	Hay Hollow, Bone Spring
11 Elevation (Show whether DR RKB RT GR etc)	3098 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  
2 Name of Operator COG Operating LLC  
3 Address of Operator 600 W Illinois Ave , Midland, TX 79701  
4 Well Location  
Unit Letter C 190 feet from the North line and 2220 feet from the West line  
Section 17 Township 26S Range 28E NMPM Eddy County

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"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER Name Change <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 19 15 7 14 NMAC For Multiple Completions Attach wellbore diagram of proposed completion or recompletion

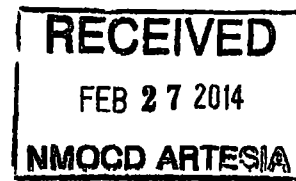
COG Operating LLC respectfully requests that this well name be changed as follows

From SRO STATE UNIT #044H

To SRO STATE COM #044H (40112)

The SRO State Unit will terminate March 1, 2014

We request that these name changes be effective March 1 2014



I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE Melanie J Parker TITLE Regulatory Analyst DATE 02/26/2014

or print name Melanie J Parker E mail address mparker@concho.com PHONE 575 748-6940  
State Use Only

APPROVED BY T.C. Shepard TITLE "Geologist" DATE 2-27-2014

Conditions of Approval (if any) Provide C102

## DISTRICT I

1800 W. FRANKLIN BL., EL PASO, NM 88540

## DISTRICT II

1801 W. GRAND AVENUE, ALBUQUERQUE, NM 87102

## DISTRICT III

1800 RIO BRAZOS RD., AZTEC, NM 87410

## DISTRICT IV

11885 S. ST. FRANCIS DR., SANTA FE, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

11885 SOUTH ST FRANCIS DR  
Santa Fe, New Mexico 87505

Form C-102

Revised October 18, 2010

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 5 Copies

## WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number 30-015-41142	Pool Code 30215	Pool Name Hay Hollow, Bone Spring
Property Code 308169	Property Name SRO STATE COM	Well Number 44H
OGED No 229137	Operator Name COG OPERATING, LLC	Elevation 3098

## Surface Location

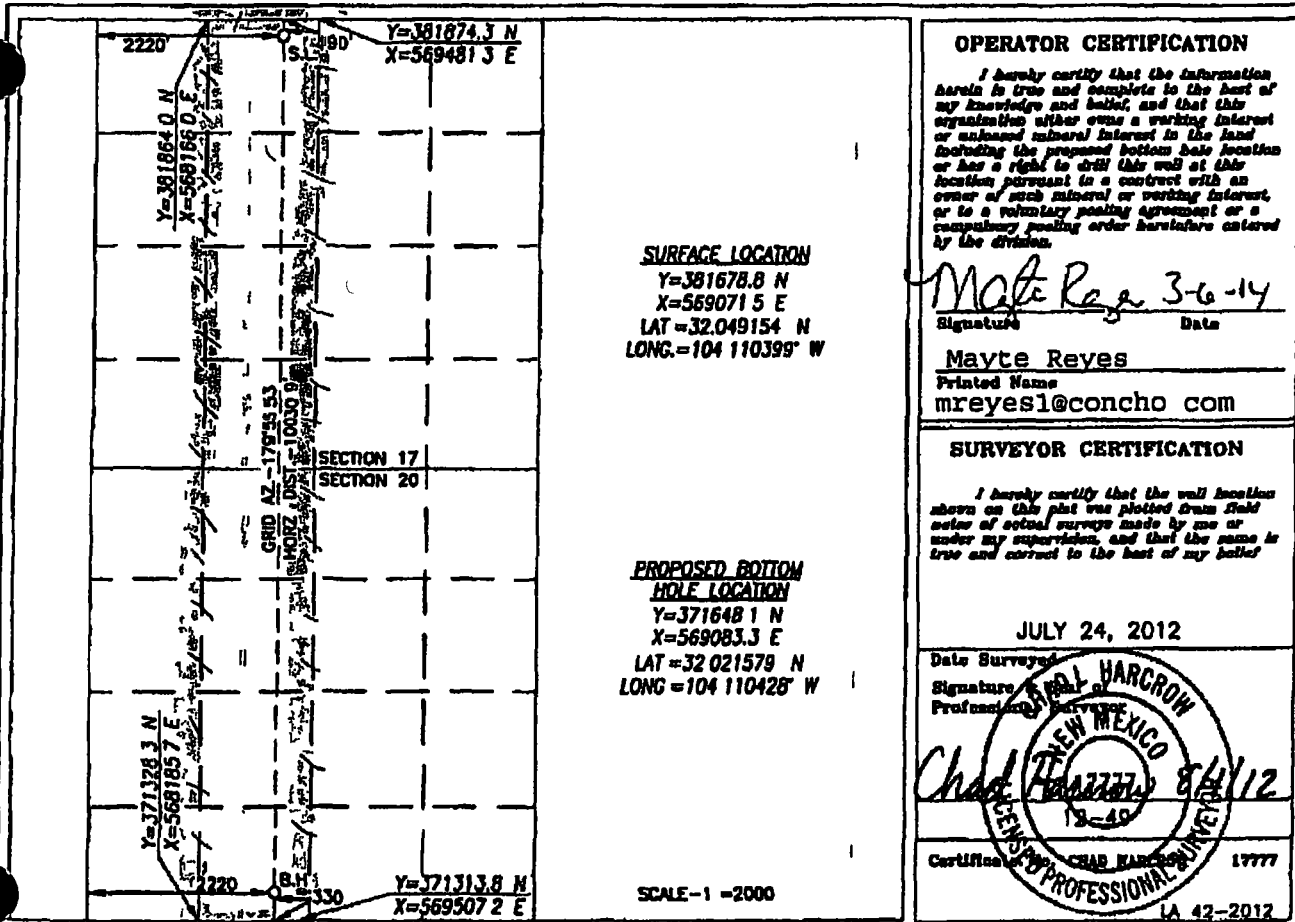
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
C	17	26-S	28-E		190	NORTH	2220	WEST	EDDY

## Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
N	20	26-S	28-E		330	SOUTH	2220	WEST	EDDY

Dedicated Acres 320	Joint or Infill	Cancellation Code	Order No.
------------------------	-----------------	-------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



**District I**  
1625 N. French Dr. Hobbs, NM 88240  
Phone (575) 393-6161 Fax (575) 393-0720  
**District II**  
S First St. Artesia, NM 88210  
Phone (575) 749-1283 Fax (575) 749-0720  
**District III**  
1000 Rio Brazos Rd. Aztec, NM 87410  
Phone (505) 334-6178 Fax (505) 334-6170  
**District IV**  
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**

Form C-103  
August 1, 2011  
Permit 104383

WELL API NUMBER  
30-015-41142

8. Indicate Type of Lease  
S

6. State Oil & Gas Lease No

7. Lease Name or Unit Agreement Name  
SRO STATE COM

**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  
O

8. Well Number  
044H

2. Name of Operator  
COG OPERATING LLC

9. OGRID Number  
229137

3. Address of Operator  
One Concho Center 600 W Illinois Ave, Midland, TX 79701

10. Pool name or Wildcat

4. Well Location  
Unit Letter C 190 feet from the N line and feet 2220 from the W line  
Section 17 Township 26S Range 28E NMPM County Eddy

11. Elevation (Show whether OR, KB, BT, GR, etc.)  
3098 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL. ☐  
Other \_\_\_\_\_

SUBSEQUENT REPORT OF

REMEDIAL WORK ☐ ALTER CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐  
CASING/CEMENT JOB ☐  
Other: Spud ☒

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.

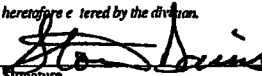
10/10/2014 Spudded well.

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 NMOC guidelines ☐ general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE \_\_\_\_\_ Electronically Signed \_\_\_\_\_ TITLE \_\_\_\_\_ Production Reporting Mgr \_\_\_\_\_ DATE \_\_\_\_\_ 10/20/2014  
Type or print name \_\_\_\_\_ Diane Kuykendall \_\_\_\_\_ E-mail address \_\_\_\_\_ production@concho.com \_\_\_\_\_ Telephone No \_\_\_\_\_ 432-683-7443

For State Use Only

APPROVED BY \_\_\_\_\_ Randy Dade \_\_\_\_\_ TITLE \_\_\_\_\_ District Supervisor \_\_\_\_\_ DATE \_\_\_\_\_ 10/21/2014

16	2220	SHL			17 OPERATOR CERTIFICATION
					I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief and that this organization either owns, works, or has a mineral interest in the land including the proposed bottom hole location has a right to drill the well at the location pursuant to a contract with an owner of such mineral rights, or to a voluntary pooling agreement or compulsory pooling order heretofore entered by the division.
					 Signature
					3/9/15 Date
					Stormi Davis Printed Name
					sdavis@concho.com E-mail Address
				Sec 17 T26S R28E	
				Sec 20 T26S R28E	
	Producing Area 8204 17580				18 SURVEYOR CERTIFICATION
					I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief
					Date of Survey
					Signature and Seal of Professional Surveyor
					REFER TO ORIGINAL PLAT
	2216	BHL			Certificate Number