

Submit 1 Copy 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

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

Form C-103  
October 13, 2009

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.)		WELL API NO. 30-025-41109
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator COG Operating LLC		6. State Oil & Gas Lease No.
3. Address of Operator 2208 W. Main Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Van Gogh Fee
4. Well Location Unit Letter <u>O</u> : <u>150</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>11</u> Township <u>24S</u> Range <u>34E</u> NMPM <u>Lea</u> County		8. Well Number 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3477'		9. OGRID Number 229137
		10. Pool name or Wildcat Red Hills; Bone Spring, North

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: <input checked="" type="checkbox"/> APD Extension		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 approval for a 1 YEAR extension on the above referenced APD.

APD EXPIRES 4/12/16  
IF NOT STARTED BY 4/12/16 MUST  
SUBMIT NEW APD

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: Regulatory Analyst DATE: 2/2/2015  
Type or print name: Mayte Reyes E-mail address: mreyes1@conchoresources.com PHONE: (575) 748-6945  
**For State Use Only**

APPROVED BY: [Signature] TITLE: Petroleum Engineer DATE: 02/03/15  
Conditions of Approval (if any):

FEB 04 2015