| Submit 1 Copy T<br>Office  | o Appropriate District   |   | State of New Me          | exico                 |                 |                         | Form C            | C-103        |
|--|--|---|--------------------------|-----------------------|-----------------|-------------------------|-------------------|--------------|
| <u>District I</u> – (575)  |  | Energy, 1   | Minerals and Natu        | iral Resources        |                 |                         | ised August       | 1,2011       |
| 1625 N. French E<br>District II – (575)  | Dr., Hobbs, NM 88240   |   |                          |                       | WELL AP         | I NO.<br>30-025-41      | 107               |              |
| 811 S. First St., A  | Artesia, NM 88210  |   | ONSERVATION              | -                     | 5 Indicate      | Type of Lease           |                   |              |
| <u>District III</u> – (505<br>1000 Rio Brazos  | 5) 334-6178<br>Rd., Aztec, NM 87410  |   | 20 South St. Fra         |                       | STA             |                         | FEE               |              |
| <u>District IV</u> - (505  | 5) 476-3460  |   | Santa Fe, NM 8           | 7505                  |                 | il & Gas Lease          |                   |              |
| 1220 S. St. Franc<br>87505   | is Dr., Santa Fe, NM   |   |                          |                       |                 |                         |                   |              |
|  |  |   | ORTS ON WELLS            |                       | 7. Lease N      | lame or Unit A          | greement N        | ame          |
|  | THIS FORM FOR PROF<br>SERVOIR. USE "APPI   |   |                          |                       |                 | Warbler St              | ate               |              |
| 1. Type of W   | ell: Oil Well 🔀  | Gas Well  | Other H                  | OBBS OCD              | 8. Well Nu      | umber<br>1H             | 1                 |              |
| 2. Name of C   |  | 1   |                          |                       | 9. OGRID        |                         |                   |              |
| COG Oper<br>3. Address of  |  |   | JU                       | L 0 9 2015            | 10 Decl.m       | 229137<br>ame or Wildca |                   |              |
|  | I Operator<br>Iain Street, Artesia   | NM 88210  |                          |                       |                 | G-06 S213323            |                   | ring         |
| 4. Well Loca   |  |   |                          | RECEIVED              |                 |                         |                   |              |
|  | Letter D   | : 330 fe  |                          | orth line and         | 190 fee         | t from the              | West              | line         |
| Secti  |  | . <u>550</u> R<br>Township  |                          | Range 33E             |                 | 1PM Lea                 |                   | · /          |
|  |  |   | (Show whether DR<br>3704 | , RKB, RT, GR, et     |                 |                         |                   |              |
| PULL OR ALT<br>DOWNHOLE  | TER CASING [   COMMINGLE [   |   | OMPL                     | CASING/CEME           | NT JOB          |                         |                   |              |
| OTHER:   |  |   |                          | OTHER:                | Drilling        |                         |                   | $\boxtimes$  |
| of star<br>propo<br>3/31/15 Spud 2<br>4/16/15 Drilled<br>5/5/15 Drilled<br>5/21/15 Drilled | ibe proposed or con<br>ting any proposed v<br>sed completion or r<br>34" hole & drill to<br>d 5' of 26" hole. Th<br>d 5' of 26" hole. Th<br>5' of 26" hole. Th<br>d 5' of 26" hole. Th<br>d 5' of 26" hole. Th | work). SEE RUL<br>ecompletion.<br>$(0^{\circ})$ . Set 10' of 30<br>$D = 15^{\circ}$ .<br>$D = 20^{\circ}$ .<br>$D = 25^{\circ}$ .<br>$= 30^{\circ}$ . | E 19.15.7.14 NMA         |                       |                 |                         |                   |              |
| г  |  |   |                          | ·                     |                 | ·                       |                   |              |
| Spud Date:   | 3/31/  | 15  | Rig Release D            | ate:                  |                 |                         |                   |              |
| I hereby certify   | that the informatic  | n above is true ar  | nd complete to the b     | est of my knowled     | dge and belief. |                         |                   |              |
| SIGNATURE  | Stand  | Joins   | TITLE:I                  | Regulatory Analys     | st              | DATE:                   | 7/3/15            | <u> </u>     |
| Type or print n  | ame: <u>Stormi E</u>   | avis  |                          | s: <u>sdavis@conc</u> | cho.com         | PHONE:                  | <u>(575) 74</u> 8 | <u>-6946</u> |
| For State Use  | Only<br>Accepted<br>BY:  | for 5   |                          |                       |                 |                         |                   |              |
| APPROVED E   | BY:<br>Approval (if any):  | <sup>ior</sup> Record   | Only ITLE                |                       |                 | DATE                    |                   |              |
| Conditions of A  | лрноvан (н апу):   |   |                          |                       | Ĵ               | UL 182                  | 015               | \$           |

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