Submit One Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natu	ral Resources	WELL ABOVE	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240 District II		ا کئی	WELL API NO. 30-025-38079	
811 S. First St., Artesia, NM 88210	OIL CONSERVATION	OTVISION	5. Indicate Type of	of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			STATE [
District IV	Santa For WM 8	75000	6. State Oil & Gas	s Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	Kr. OEC	"IED	Oil	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLACE BACK TO A			7. Lease Name or Unit Agreement Name West Pearl 36 State	
PROPOSALS.)			8. Well Number 001	
Type of Well:			9. OGRID Number	
COG Operating LLC			229137	
3. Address of Operator			10. Pool name or Wildcat	
2208 W Main Artesia NM 88210			Lea; Delaware, Northeast	
4. Well Location				
Unit Letter F: 1980 feet	from the North line and 1740 feet	from the West line		
Section 36 Township 198 Range 34E NMPM County Lea				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3716' GR				
12. Check Appropriate Box to	Indicate Nature of Notice, R	eport or Other Da	ıta	lon.
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🗆	
071150			ale a mark to the first time and a second	Will Company of the C
OTHER: All pits have been remediated in	compliance with OCD rules and t	he terms of the Opera	otor's nit nermit and	l closure plan
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.				
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the				
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR				
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
PRIMARIE DIAMIED ON THE MARKER O SCREECE				
	nearly as possible to original grou	nd contour and has b	een cleared of all ju	ınk, trash, flow lines and
other production equipment.				
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.				
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed				
from lease and well location.				
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have				
to be removed.)				
 ✓ All other environmental concerns have been addressed as per OCD rules. ✓ Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- 				
retrieved flow lines and pipelines.	n abandoned in accordance with	19.15.35.10 NMAC.	An muids have bee	n removed from non-
☐ If this is a one-well lease or last r	emaining well on lease: all electri	cal service poles and	lines have been rer	noved from lease and well
location, except for utility's distribution		•		
When all work has been completed, return this form to the appropriate District office to schedule an inspection.				
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SIGNATURE COLUMN	TITLE:_	Regulatory Tech	D	ATE:12/04/18
	T1	10 00		HONE
TYPE OR PRINT NAME: Delilah	FloresE-MAIL:	dflores2@conch	o.comP	HONE: _575-748-6946_
For State Use Only	•		, A	
APPROVED BY: Kerry 3	TOTHE TITLE (compliance OD	him H	DATE 12-11-18
Conditions of Approval (if any).		P	<i>y</i> —	