

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
HOBBS OCD  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
APR 24 2019

Form C-103  
Revised July 18, 2013

WELL API NO.	30-025-26773
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-2317	
7. Lease Name or Unit Agreement Name Hale	
8. Well Number 1-Y	
9. OGRID Number 286255	
10. Pool name or Wildcat Midway Strawn	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,781 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator Cobalt Operating, LLC
3. Address of Operator PO Box 51468, Midland Texas 79710 Unit J, 2260 FSL and 1650' FEL, Section 8, T-17-S, R-37-E

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 PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: ☐

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.

Repair or replace existing downhole pump. Anticipate work to begin April 22, 2019.

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

*Mark Burkett*

TITLE: Engineer DATE: 4/16/2019

Type or print name Mark Burkett E-mail address: mark@cobaltoperating.com PHONE: 432-312-5939

**For State Use Only**

APPROVED BY:

*Kerry Fritze*

TITLE

*Compliance Officer A*

DATE

*4-25-19*

Conditions of Approval (if any):