

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

Form C-103
October 13, 2009

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

| 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"/> | 7. Lease Name or Unit Agreement Name <input checked="" type="checkbox"/> Boone 16 State Com |
| 2. Name of Operator <input checked="" type="checkbox"/> COG Operating LLC | 8. Well Number <input checked="" type="checkbox"/> 3H |
| 3. Address of Operator 2208 W. Main Street, Artesia, NM 88210 | 9. OGRID Number 229137 |
| 4. Well Location Unit Letter <u>N</u> : <u>190</u> feet from the <u>South</u> line and <u>2310</u> feet from the <u>West</u> line <input checked="" type="checkbox"/> Section <u>16</u> Township <u>21S</u> Range <u>33E</u> NMPM Lea County | 10. Pool name or Wildcat <input checked="" type="checkbox"/> WC-025 G-08 S213304D; Bone Spring |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3758' | |

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: <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 to withdraw the above referenced 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: 9/12/2016
Type or print name: Mayte Reyes E-mail address: mreyes1@conchoreources.com PHONE: (575) 748-6945
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 09/12/2016
Conditions of Approval (if any):