Submit I Copy To Appropriate District Office State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resource 1625 N. French Dr., Hobbs, NW 88242 1 2013	Revised August 1, 2011 WELL API NO.
District H (575) 749 1292	20.025.40016
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 RECEIVED: 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Conto Ec. NIM 87505	STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505 SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)	Gettysbung blute com
1. Type of Well: Oil Well Gas Well Other	8. Well Number
2. Name of Operator	9. OGRID Number
COG Operating LLC	229137
3. Address of Operator	10. Pool name or Wildcat
2208 W. Main Street, Artesia, NM 88210	Antelope Ridge; Bone Spring, West
4. Well Location Unit Letter B: 160 feet from the North line an	ad 2040 feet from the East line
Section 16 Township 23S Range	34E NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR	
3415' GR	And the second s
12. Check Appropriate Roy to Indicate Nature of No.	tica Papart or Other Data
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL TEMPORARILY ABANDON CHANGE PLANS COMMENC	WORK ☐ ALTERING CASING ☐ E DRILLING OPNS. ☐ P AND A ☐
PULL OR ALTER CASING MULTIPLE COMPL CASING/CE	-
DOWNHOLE COMMINGLE	-
OTHER:	Drilling 🖂
13. Describe proposed or completed operations. (Clearly state all pertinent detail	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	
8/25/13 Drilled 5'. TD = 45'.	
9/12/13 Drilled 5'. TD = 50'.	
9/30/13 Drilled 5'. TD = 55'.	
7/30/13 Diffied 5 . 1D = 35 .	
Spud Date: Rig Release Date:	
L	
I hereby certify that the information above is true and complete to the best of my known	wledge and belief.
A-a	
SIGNATURE TITLE: Regulatory An	alyst DATE: <u>10/17/13</u>
Type or print name: Stormi Davis E-mail address: sdavis@c	concho.com PHONE: (575) 748-6946
For State Use Only	
Accepted for Record Only	5.45
APPROVED BY: Conditions of Approval (if any):	DATE