Submit I Copy To Appropriate District Office District I	Energy, Minerals and Natural Resources ond Ave., Ariesia, NM 88210 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		Form C-103 October 13, 2009
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-025-42351
District III			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.
1220 S. 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			7. Lease Name or Unit Agreement Name Osprey 20 State Com
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other HOBBSOCD			8. Well Number
2. Name of Operator		INGERGARI	9. OGRID Number
COG Operating LLC		+EB 2 3 2015	229137
3. Address of Operator 2208 W. Main Street, Artesia, NM	88210	CD 4 a ZUIJ	10. Pool name or Wildcat WC-025 G-07 S213430M; Bone Spring
4. Well Location		RECEIVED	
	2450 feet from the South		
Section 20 Township 21S Range 34E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
	374		
12. Check Appropriate Box to Indi	cate Nature of Notice, Re	port or Other Da	ta
그렇으면 있다. 나도 보는 어린 보는 모든 보는 생물을 들어 있다. 이 그 그 모든 그리 나를 보는 것은		REMEDIAL WORK COMMENCE DRIL CASING/CEMENT	LING OPNS. PAND A
OTHER 🗵 SHL Change		OTHER:	
 Describe proposed or completed oper starting any proposed work). SEE R completion or recompletion. 	ations. (Clearly state all pertin ULE 19.15.7.14 NMAC. For I	ent details, and give Multiple Completion	pertinent dates, including estimated date of s: Attach wellbore diagram of proposed
COG Operating LLC respectfully requ	uests approval for the follow	ing SHL changes	to the original approved APD.
From: 2450' FSL & 280' FWL			
To: 2450' FSL & 230' FWL			
See attached C102.			
Spud Date:	Rig Release Da	ie:	
I hereby certify that the information above	is true and complete to the be	st of my knowledge	and belief
signature Matelo		ulatory Analyst	DATE: <u>2/20/2015</u>
	^		
pe or print name: <u>Mayte Reyes</u> E-mail address: <u>mreyes1@conchoresources.com</u> PHONE: <u>(575) 748-694;</u> r State Use Only			
APPROVED BY:	TITLE Pet	roleum Engineen	DATE 02/23/16
Conditions of Approval (1) any):			DATE