Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-42527 5. Indicate Type of Lease
District III - (505) 334-6178	1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
BUACTONS	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	GALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	Corazon 4 State SWD -
1. Type of Well: Oil Well	Gas Well Other SWD HOBBS OCD	8. Well Number 2
2. Name of Operator COG Operating LLC	OCT 0 1 2015	9. OGRID Number 229137
3. Address of Operator	D.C. 00010	10. Pool name or Wildcat
2208 W. Main Street, Artesia, N	RECEIVED	SWD; Devonian
4. Well Location		
Unit Letter <u>D</u> :	3500 feet from the <u>North</u> line and <u>2</u>	
Section 4	Township 21S Range 33E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Lea County
	3818' GR	
12. Check A	ppropriate Box to Indicate Nature of Notice,	Report or Other Data
NOTICE OF IN		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
	CHANGE PLANS COMMENCE DRI	
PULL OR ALTER CASING		
DOWNHOLE COMMINGLE		
OTHER:		
	eted operations. (Clearly state all pertinent details, and	Completion Operations
	rk). SEE RULE 19.15.7.14 NMAC. For Multiple Cor	
proposed completion or rece		
8/24/15 to 8/27/15 MIRU. Test csg	to 1500#. No leak-off. Drill CBP @ 11490'. Clean d	own to TD.
8/31/15 to 9/8/15 Set treating pkr @	11501' & test csg to 1200#. Good test. Pump 40000	gal 20% HCl. TOH w/pkr.
	-110 Glassbore tbg & pkr @ 15502'. Circ well w/690	
while building battery.	mins. (Chart is attached.) No loss of pressure. Test w	itnessed by Hobbs OCD rep. Well is shut-in
Injection Interval 15615-16850' (S	WD-1528)	
Spud Date: 6/2/15	Rig Release Date:	8/10/15
Spud Date.	Rig Release Date.	
		F
I hereby certify that the information	above is true and complete to the best of my knowledge	e and belief
SIGNATURE Stores	TITLE: Regulatory Analyst	DATE:/30/15
Type or print name: Stormi Dav	is E-mail address: sdavis@conche	PHONE: (575) 748-6946
For State Use Only	5)	
APPROVED BY: Sill	manake TITLE Staff Man	Dage DATE 10/22/15
Conditions of Approval (if any):	IIILE CITI DIM.	DATE DATE

OCT 2 2 2015

