HOBBS DCC

| Submit One Copy To Appropriate District State of New Mexico | Form C-103 |
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| Office Energy, Minerals and Natural Resor | |
| 1625 N. French Dr., Hobbs, NM SSQUEVED District II 1301 W. Grand Ave. Artagia NM 88210 OIL CONSERVATION DIVISI | 20 025 29626 |
| 1301 W. Grand Ave., Artesia, NM 88210OIL CONSERVATION DIVISIDistrict III1220 South St. Francis Dr. | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505 | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | Harvard |
| PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other | 8. Well Number 001 |
| 2. Name of Operator | 9. OGRID Number |
| COG Operating LLC | 229137 |
| Address of Operator One Concho Center W Illinois Ave, Midland, TX 79701 | 10. Pool name or Wildcat Foster;San Andres |
| 4. Well Location | |
| Unit Letter <u>O</u> : <u>330</u> feet from the <u>South</u> line and <u>2310</u> : | |
| Section <u>31</u> Township <u>18S</u> Range <u>39E</u> NMPM County <u>Lea</u> 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | |
| 3606' GR | |
| 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 WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB Image: Complement of the second | |
| OTHER: | |
| All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. | |
| Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the | |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR | |
| UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE. | |
| | |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment. | |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. | |
| If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location. | |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have | |
| to be removed.) | |
| All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- | |
| retrieved flow lines and pipelines. | |
| If this is a one-well lease or last remaining well on lease, all electrical service, poles and lines, not to include primary service | |
| company equipment, has been removed from lease and well location. When all work has been completed, return this form to the appropriate District office to schedule an inspection. | |
| | |
| SIGNATURE <u><u><u></u></u><u><u><u></u><u></u><u><u></u><u></u><u>SIGNATURE</u> <u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u></u></u></u></u> | y Analyst DATE <u>9/8/15</u> |
| TYPE OR PRINT NAME Brian Maiorino E-MAIL: bmaiorino@c | oncho.com PHONE: 432-221-0467 |
| For State Use Only | |
| APPROVED BY: Mail Whiteher TITLE Petroleum Engr. Specialist DATE 01/14/2016 W | |
| Conditions of Approval (if any): | |
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