Submit 1 Copy To Appropriate District Office		New Mexico		Form C-103			
District 1 - (575) 393-6161	Energy, Minerals a	and Natural Res	ources	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				30-025-42742 / 5. Indicate Type of Lease			
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.			STATE STEE			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505				Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM							
87505	ICES AND REPORTS ON	WELLS	· ·	7 Leans Now	e or Unit Agree	mont Nama	
1				7. Lease Ivaii	_	ment Name	
DIFFERENT RESERVOIR. USE "APPLI	ICATION FOR PERMIT" (FORM	1 C-101) FOR SUC	O.		Queso State	/	
Type of Well: Oil Well 🔯 Gas Well 🖂 Other				8. Well Numl	ner		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCCESSION OF Well: Oil Well Gas Well Other 2. Name of Operator COG Production LLC				o. Well Ivaille	7H	′	
2. Name of Operator		1870	3,10	9. OGRID Ni	ımber		
COG Production LLC		RECE!	150		217955		
3. Address of Operator		-CE	M. Fr	10. Pool nam			
2208 W. Main Street, Artesia,	NM 88210	RED		Trist	e Draw; Bone S	pring	
4. Well Location							
Unit Letter O: 190 feet from the South line and 2160 feet from the East line							
Section 36 Township 23S Range 32E NMPM Lea County							
11. Elevation (Show whether DR, RKB, RT, GR, etc.)							
		3650' 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							
DOWNHOLE COMMINGLE							
OTHER:		ОТНЕ		ompletion Ope			
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 re-	completion.						
11/4/15 Load & test 9 5/8" x 5 1/2" to 9500#. Good test. Ran CBL. TOC @ 2582'. Set CBP @ 13930'. Test csg to 8200#. Good							
test. Perf 13880-13890' (60). Injection test into perfs.							
1/27/16 to 2/2/16 Perf Bone Spring 9711-13830' (1008). Acdz w/86304 gal 15% acid. Frac w/8467491# sand & 7937103 gal fluid.							
2/6/16 to 2/7/16 Drilled out CFP's. Circulate clean.							
2/9/16 to 2/10/16 Set 2 7/8" 6.5# L-80 tbg @ 8999' & pkr @ 8984'. Installed gas-lift system.							
2/11/16 Began flowing back & test	ing.						
		_			-: -		
Spud Date: 10/6/1	5 Rig R	elease Date:	1	0/23/15			
		<u> </u>					
I hereby certify that the information	ahava is true and samplet	a to the best of m	r Imaruladaa	and baliaf			
Thereby certify that the information	above is true and complete	e, to the best of m	y knowledge	and bener.			
SIGNATURE San	TITL	F: Regulato	ry Analyst		DATE: 2/	12/16	
Type or print name: Stormi Da		il address: sda		com	PHONE: (5'		
	12-1116	uuui 055. <u>5ua</u>	· 10(W/COHCHO.		_ 111011D. <u>()</u>	121170-02 7 0	
For State Use Only		_				///	
APPROVED BY:	zan Titi	LE Petrol	leum Engin	ieer	DATE <u>02</u>	122/16	
Conditions of Approval (if any):					<u>-</u>		