

Submit 1 Copy To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM

87505

HOBBS OCD

MAY 03 2018

RECEIVED

State of New Mexico

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

20 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

October 13, 2009

WELL API NO.	30-025-42041
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Kingfisher State Com
8. Well Number	4H
9. OGRID Number	229137
10. Pool name or Wildcat	Airstrip; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3998'

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 PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator COG Operating, LLC	
3. Address of Operator 2208 W. Main Street, Artesia, NM 88210	
4. Well Location Unit Letter <u>M</u> : <u>190'</u> feet from the <u>South</u> line and <u>900'</u> feet from the <u>West</u> line Section <u>23</u> Township <u>18S</u> Range <u>34E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3998'	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
OTHER: <input checked="" type="checkbox"/> APD Extension	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

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 recompletion.

COG Operating LLC respectfully requests approval for a 1 year extension on the above referenced APD.

C102 Attached.

Future extension requests must be accompanied by Form C-102

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Genesis Vasquez TITLE: Regulatory Assistant DATE: 5/3/18

Type or print name: Genesis Vasquez E-mail address: gearzaperez@concho.com PHONE: (575) 748-6926

For State Use Only

APPROVED BY: Karen Sharp TITLE: Staff Mgr DATE: 5-3-18

Conditions of Approval (if any):