

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

HOBBS OCD  
JUL 02 2018  
RECEIVED

Oil and Gas Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-41236
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator COG Operating LLC		6. State Oil & Gas Lease No.
3. Address of Operator 2208 W Main Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Veto State Com
4. Well Location Unit Letter C : 160 feet from the North line and 2030 feet from the West line Section 16 Township 23S Range 34E NMPM County Lea		8. Well Number #2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3669' GL		9. OGRID Number 229137
		10. Pool name or Wildcat Bell Lake; Delaware Basin

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

NOTICE OF INTENTION	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <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.

06/07/18 MIRU Plugging Equipment. POH w/ 56 7/8" rods w/ a clean body break. ND well head, NU BOP. Unset TAC & POH w/ 5 stands of tbq full of oil. Dug out cellar. 06/08/18-06/09/18 Waited on mud bucket. Continued POH w/ 22 stands of tbq. RU Rod equipment & POH w/ 280 rods, 12 K-bars, & pump. POH w/ 225 jts of tbq & TAC. Circulated hole w/ brine. Set 5 1/2" CIBP @ 7900'. 06/12/18 Circulated hole w/ MLF. Pressure tested csg, held 500 psi. Spotted 25 sx class H cmt @ 7900-7652'. Spotted 25 sx class C cmt @ 7020-6757'. WOC. 06/13/18 Tagged plug @ 6675'. Spotted 40 sx class C cmt w/ 2% CACL @ 5075-4649'. WOC. Tagged plug @ 4665'. Perf'd csg @ 1400'. Pressured up on perfs to 1200 psi. Spotted 50 sx class C cmt @ 1750-1250'. WOC. Tagged plug @ 1270'. Perf'd csg @ 500'. Pressured up on perfs to 600 psi. Perf'd csg @ 100'. RU Pump & broke circulation up the 9 5/8" not no circulation on the 13 3/8" csg. Spotted 40 sx class C cmt w/ 2% CACL @ 550-146'. WOC Tagged plug @ 164'. ND BOP. NU Well head flange. Sqz'd 50 sx class C cmt @ 100' & circulated to surface on the 9 5/8-5 1/2" annulus'. Pressured up on plug to 500 psi. Rigged down & moved off. 06/18/18 Moved in backhoe and welder. Dug out cellar. Cut off well head. Welded on "Below Ground Dry Hole Marker". Backfilled cellar. Cut off deadmen. Cleaned location, moved off.

Spud Date:

Rig Release Date

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.  
Restoration Due By 06-14-2019

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

SIGNATURE Amanda Avery TITLE Regulatory Tech DATE 06/26/18

Type or print name Amanda Avery E-mail address: aavery@concho.com PHONE: 575-748-6940

For State Use Only

APPROVED BY: Mark L. Talar TITLE PES DATE 07/02/2018  
Conditions of Approval (if any):