Submit One Copy To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		
Submit One Copy To Appropriate District	Form C-103	
Office District I Minerals and Natural Resources	Revised November 3, 2011	
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.	
District II 811 S. First St., Artesia, NM 88210	30-025-41441 5. Indicate Type of Lease	
District III	STATE STATE	
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 A	Old Boy State	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		
1. Type of Well: Oil Well Gas Well Other	8. Well Number 2H	
2. Name of Operator	9. OGRID Number	
COG Operating LLC	229137 10. Pool name or Wildcat	
3. Address of Operator2208 W Main Street, Artesia, NM 88210	Delaware	
4. Well Location		
4. Wen Location Unit Letter <u>B</u> : <u>190</u> feet from the <u>North line</u> and <u>1600</u> feet from the <u>East line</u>		
Section <u>36</u> Township <u>198</u> Range <u>22E</u> NMPM <u>45</u> County <u>Lea</u>	/	
11. Elevation (Show whether DR, RKB, RT, GR, etc.,		
3669'		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other D	ata	
NOTICE OF INTENTION TO: SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	= / -	
OTHER: Contract of the Operation of the	eady for OCD inspection after P&A	
 An pits have been remediated in compliance with OCD futes 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		
ORDATOR NAME A FASE NAME WELL NUMBER ARINIMED OF	ARTER/OUARTER LOCATION OR	
<u>OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR</u> UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR		
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.	IT HAS BEEN WEEDED OK	
\boxtimes 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 grou	nd lavel	
IX If this is a one-well lease or last remaining well on lease, the battery and nit location(s)		
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, prod	have been remediated in compliance with	
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, prod from lease and well location.	have been remediated in compliance with uction equipment and junk have been removed	
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SIGNATURE Amundu Avery	TITLE_Regulatory TechDATE0	6/28/18
TYPE OR PRINT NAME Amanda Avery	E-MAIL: aavery@concho.com PHONE: _575	-748-6940
For State Use Only		
APPROVED BY: Manhe tritaken		O7/05/18
Conditions of Approval (if any):		