State of New Mexico   State of New	Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103	
District IV - (50) 476-3460   1220 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   St. St. Francis Dr., Santa F., NM   St. St. Practical Dr., St.	District I – (575) 393-6161	Minerals and Natural Resources		
District IV - (50) 476-3460   1220 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   St. St. Francis Dr., Santa F., NM   St. St. Practical Dr., St.	1625 N. French Dr., Hobbs, NM 88240		1	
District IV - (50) 476-3460   1220 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   St. St. Francis Dr., Santa F., NM   St. St. Practical Dr., St.	District II - (5/5) /48-1283 811 S. First St., Artesia, NM 88210	ONSERVATION DIVISION		
District IV - (50) 476-3460   1220 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   STOS   1.20 S. St. Francis Dr., Santa F., NM   St. St. Francis Dr., Santa F., NM   St. St. Practical Dr., St.	District III - (505) 334-6178	20 South St. Francis Dr.		
SUNDRY NOTICES AND REPORTS ON WELLS  DO NOT USE THIS PORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLIJO BACK TO A DEFERRENT RESERVOIR. USE 'APPLICATION FOR FERMIT' (FORM C-101) FOR SUCH PROPOSALS.  1. Type of Well: Oil Well  Gas Well  Other	1000 Rio Brazos Rd., Aztec, NM 87410 J	Santa Fe, NM 87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DONOT USE THIS FORM FOR PROPOSALS TO DRILLO REPERTOR PLUG BACK TO A DIFFERNIT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well: Oil Well	1220 S. St. Francis Dr., Santa Fe, NM		o. State on to das Boase 110.	
DON OT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOUR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.]  1. Type of Well: Oil Well   Gas Well   Other   8. Well Number   14H   14	87505	DODTE ON WELLE	TT Y NT TT TT	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)   1. Type of Well: Oil Well   Gas Well   Other				
Alf	DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			
2. Name of Operator COG Operating LLC 2. Address of Operator 2. Address of Operator 2. Actes of Operator 2. Operator 3. Operator 4. Operator 4. Operator 4. Operator 5. Operator 5. Operator 6.		Other	I	
3. Address of Operator   2208 W. Main Street, Artesia, NM 88210   10. Pool name or Wildcat   WC-025 G-08 S2253534O; Bone Spring   4. Well Location   Unit Letter   D : 221 2/9   feet from the   North   line and   1194   feet from the   West   line   Section   21   Township   25S   Range   35E   NMPM   Lea   County   11. Elevation (Show whether DR, RKB, RT, GR, etc.)   3238' GR	2. Name of Operator			
4. Well Location Unit Letter D: 221   Geet from the North   Line and   Line and   Line   Lea   County    11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3238' 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   COMMENCE DRILLING OPNS.   PAND A   DOWNHOLE COMMINGLE   CLOSED-LOOP SYSTEM   OTHER: Completion Operations   CLOSED-LOOP SYSTEM   OTHER: Completion 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.  9/22/18 Test annulus to 1500# for 30 mins. Good test. Ran CBL. TOC @ 1440'. Set CBP @ 15,622'. Test to 10,002#. Test good.  10/10/18 - 10/14/18 Perf 11,100-15,610' (750). Acdz w/ 73,801 gal 7-1/2%; frac w/ 8,790,381#sand & 9,403,909 gal fluid.  10/15/18 to 10/16/18 Drill out CFP's. Clean down to PBTD @ 15,610'.  11/2/18- 11/3/18 Set 2 7/8" 6.5# L-80 tg @ 10,204' & pkr @ 10,194'.  11/10/18 Began flowback & testing. Date of first production.  Thereby certify that the information above is true and complete to the best of my knowledge and belief.				
4. Well Location   Unit Letter   D   21   21   feet from the   North   line and   1194   feet from the   West   line   Section   21   Township   25S   Range   35E   NMPM   Lea   County     11. Elevation (Show whether DR, RKB, RT, GR, etc.)   3238' GR     12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:   REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   OTHER:   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   REMEDIAL WORK   ALTERING CASING   CASING/CEMENT JOB   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   OTHER:   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   COMMENCE DRILLING OPNS.   PAND A   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   COMMENCE DRILLING OPNS.   PAND A   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   CHANGE PLANS   OTHER:   Completion Operations   SIBSEQUENT REPORT OF:   CHANGE PLANS   OTHER:   COMMENCE DRILLING OPNS.   PAND A   DOWNHOLE COMMINGLE   COMMENCE DRILLING OPNS.   PAND A   DOWNHOLE COMMINGLE   COMMENCE DRILLING OPNS.   PAND A   DOWNHOLE COMMINGLE   COMMENCE DRILLING OPNS.   PAND A   DOWNHOLE COMMENCE DRILLING OPNS.   PAND			1	
Unit Letter D : 221 Township 25S Range 35E NMPM Lea County    11. Elevation (Show whether DR, RKB, RT, GR, etc.)			WC-025 G-08 S2253534O; Bone Spring	
Section   21   Township   25S   Range   35E   NMPM   Lea   County   11. Elevation (Show whether DR, RKB, RT, GR, etc.)   3238' GR	4. Well Location			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3238' GR  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS.   P AND A   DOWNHOLE COMMINGLE   CLOSED-LOOP SYSTEM   OTHER: Completion Operations   OTHER: Completion Operations   OTHER: Completion or recompletion.  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.  9/22/18 Test annulus to 1500# for 30 mins. Good test. Ran CBL. TOC @ 1440'. Set CBP @ 15,622'. Test to 10,002#. Test good.  10/10/18 - 10/14/18 Perf 11,100-15,610' (750). Acdz w/ 73,801 gal 7-1/2%; frac w/ 8,790,381#sand & 9,403,909 gal fluid.  10/15/18 to 10/16/18 Drill out CFP's. Clean down to PBTD @ 15,610'.  11/2/18-11/3/18 Set 2 7/8' 6.5# L-80 tbg @ 10,204' & pkr @ 10,194'.  11/10/18 Began flowback & testing. Date of first production.  Spud Date: 8/29/18 Rig Release Date: 9/17/18  Thereby certify that the information above is true and complete to the best of my knowledge and belief.	Unit Letter D: 231 fe	eet from the <u>North</u> line and	1194 feet from the West line	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK	Section 21 Township	25S Range 35E	NMPM Lea County	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS.   PAND A   DOWNHOLE COMMINGLE   CASING/CEMENT JOB   OTHER: Completion Operations   CASING/CEMENT JOB   OTHER: Completion Operations   OTHER: Completion or recompleted 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.  9/22/18 Test annulus to 1500# for 30 mins. Good test. Ran CBL. TOC @ 1440'. Set CBP @ 15,622'. Test to 10,002#. Test good.  10/10/18 - 10/14/18 Perf 11,100-15,610' (750). Acdz w/ 73,801 gal 7-1/2%; frac w/ 8,790,381#sand & 9,403,909 gal fluid.  10/15/18 to 10/16/18 Drill out CFP's. Clean down to PBTD @ 15,610'.  11/2/18- 11/3/18 Set 2 7/8" 6.5# L-80 tbg @ 10,204' & pkr @ 10,194'.  11/10/18 Began flowback & testing. Date of first production.  Spud Date: 8/29/18 Rig Release Date: 9/17/18  Thereby certify that the information above is true and complete to the best of my knowledge and belief.				
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   COMMENCE DRILLING OPNS   ALTERING CASING   COMMENCE DRILLING OPNS   PAND A   CASING/CEMENT JOB   CASING/CEMENT JOB   CASING/CEMENT JOB   CASING/CEMENT JOB   OTHER: Completion Operations   OTHER: Completion Operations   OTHER: Completion Operations   OTHER: Completion or recompleted 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.  9/22/18 Test annulus to 1500# for 30 mins. Good test. Ran CBL. TOC @ 1440'. Set CBP @ 15,622'. Test to 10,002#. Test good.  10/10/18 - 10/14/18 Perf 11,100-15,610' (750). Acdz w/ 73,801 gal 7-1/2%; frac w/ 8,790,381#sand & 9,403,909 gal fluid.  10/15/18 to 10/16/18 Drill out CFP's. Clean down to PBTD @ 15,610'.  11/2/18-11/3/18 Set 2 7/8" 6.5# L-80 tbg @ 10,204' & pkr @ 10,194'.  11/10/18 Began flowback & testing. Date of first production.  Spud Date: 8/29/18 Rig Release Date: 9/17/18  Thereby certify that the information above is true and complete to the best of my knowledge and belief.				
PERFORM REMEDIAL WORK  PLUG AND ABANDON  ALTERING CASING  ALTERING CASING  ALTEROPARRILY ABANDON  ALTER CASING  ALTER COMMENCE DRILLING OPNS.	12. Check Appropriate F	Box to Indicate Nature of Notice,	Report or Other Data	
PERFORM REMEDIAL WORK  PLUG AND ABANDON  ALTERING CASING  ALTERING CASING  ALTEROPARRILY ABANDON  ALTER CASING  ALTER COMMENCE DRILLING OPNS.	NOTICE OF INTENTION	TO:   SUB	SECUENT REPORT OF	
TEMPORARILY ABANDON		ł · · · · · · · · · · · · · · · · · · ·		
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   CLOSED-LOOP SYSTEM   OTHER: Completion Operations   OTHER: Completions: Attach wellbore diagram of proposed completion or recompletion.   Polyage   Other   Other	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<del>_</del>	
CLOSED-LOOP SYSTEM  OTHER:  OTHER:  Completion Operations  S  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.  9/22/18 Test annulus to 1500# for 30 mins. Good test. Ran CBL. TOC @ 1440'. Set CBP @ 15,622'. Test to 10,002#. Test good.  10/10/18 - 10/14/18 Perf 11,100-15,610' (750). Acdz w/ 73,801 gal 7-1/2%; frac w/ 8,790,381#sand & 9,403,909 gal fluid.  10/15/18 to 10/16/18 Drill out CFP's. Clean down to PBTD @ 15,610'.  11/2/18- 11/3/18 Set 2 7/8" 6.5# L-80 tbg @ 10,204' & pkr @ 10,194'.  11/10/18 Began flowback & testing. Date of first production.  Spud Date:  8/29/18  Rig Release Date:  9/17/18  I hereby certify that the information above is true and complete to the best of my knowledge and belief.	— — — — — — — — — — — — — — — — — — —			
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$\Lambda$ , $\Lambda$ , $\Lambda$	I hereby certify that the information above is true as	nd complete to the best of my knowledg	e and belief.	
SIGNATURE TITLE: Regulatory Tech II DATE: 01/08/19				
Type or print name: Amanda Avery E-mail address: aavery@concho.com PHONE: (575) 748-6962	Type or print name: Amanda Avery	E-mail address: <u>aavery@conc</u>	ho.com PHONE: (575) 748-6962	
For State Use Only				
APPROVED BY: Sharp TITLE Staff Mg DATE 1-14-19 Conditions of Approval (if any):	ATROVED DT.	TITLE Staff Mgs	DATE 1-14-19	