

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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-28697
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-731
7. Lease Name or Unit Agreement Name New Mexico EF State
8. Well Number #3
9. OGRID Number 229137
10. Pool name or Wildcat Cruz Delaware

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator
COG Operating, LLC

3. Address of Operator
600 W. Illinois Ave, Midland, TX 79701

4. Well Location
Unit Letter **M** : **990** feet from the **S** line and **330** feet from the **W** line
Section **17** Township **23S** Range **33E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3712' GR

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

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

01/09/19 MIRU plugging equipment. Opened well to 800 PSI. Dug out cellar, NU BOP, POH w/ 20 stands of tbg. 01/10/19 RU vacuum pump, well had water flow. Finished POH w/ tbg. Set 5 1/2" CIBP @ 5110'. Circulate hole w/ salt gel. Pressure test csg, held 50 psi. Spotted 25 sx class C cmt @ 5110-4860'. (Kerry Fortner w/ NM OCD okayed not to WOC & Tag). Spotted 25 sx class C cmt @ 2510-2260'. Spotted 25 sx class C cmt @ 2000-1750'. WOC. Tagged plug @ 1719'. Perf'd csg @ 701'. Pressured up to 500 psi w/ no circulation. ND BOP. Spotted 85 sx class C cmt @ 751' & circulated to surface. Verified cmt @ surface. Rigged down & moved off. 01/17/19 Moved in backhoe and welder, dug out cellar, cut off well head, and verified cement to surface (Kerry Fortner w/ NM OCD as witness). Welded on "Below Ground Dry Hole Marker". Backfilled cellar, cut off deadmen, cleaned location, and moved off.

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

TITLE Regulatory Technician

DATE 1/29/19

Type or print name Delilah Flores
For State Use Only

E-mail address: dflores2@concho.com PHONE: 575-748-6946

APPROVED BY:

Kerry Fortner

TITLE

Compliance Officer A

DATE

2-6-19

Conditions of Approval (if any)