

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 88200  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87418  
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. 30-025-26323
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Warren
8. Well Number: 1
9. OGRID Number 076782
10. Pool name or Wildcat Midway Devonian

**SUMMARY 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 ☐ Gas Well ☐ Other ☐

2. Name of Operator  
Cobalt Operating, LLC

3. Address of Operator  
PO Box 51468, Midland, TX 79710

4. Well Location  
Unit Letter G : 2088 feet from the North line and 1976 feet from the East line  
Section 8 Township 17-s Range 37-E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3785'

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 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 checked="" 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.

Plan to pull rods and tubing and acidize the recently drilled horizontal lateral with perforations from 11,995' to 13,094' measured depth with packer setting immediately above the top of the cement liner at 10,300. The TVD of the perforations are all located within the Devonian formation. The proposed acid treatment is 4,000 gallons of 28% HCL Acid.

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 Mark Burkett TITLE Engineer DATE: 5/21/2019

Type or print name: Mark Burkett E-mail address: mark@cobaltoperating.com PHONE: 432-312-5939

**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 06/07/19  
Conditions of Approval (if any):