| Submit 1 Copy To Appropriate District | State of New Me | vico | Form C-103 |
|---|--|-----------------------------------|------------------------------|
| Office | Energy, Minerals and Natural Resources | | Revised July 18, 2013 |
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, minerals and Natural Resources | | WELL API NO. |
| District II - (575) 748-1283 | OIL CONSERVATION | DIVISION | 30-025-46257 |
| 811 S. First St., Artesia, NM 88210 District III (505) 334-6178 | 1220 South St. Fra | | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Sente Ec. NM 97 | ACCERS OC | D STATE 🖾 FEE 🖄 |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87 | | 6. State Oil & Gas Lease No. |
| 87505 | | DEC 092019 | |
| | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLRECEIVED DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH VED PROPOSALS.) | | | Valor State Com |
| 1. Type of Well: Oil Well 🛛 Gas Well 🗌 Other | | | 8. Well Number 702H |
| 2. Name of Operator | | | 9. OGRID Number |
| COG Operating LLC | | 229137 | |
| 3. Address of Operator | | 10. Pool name or Wildcat | |
| 600 W. Illinois Ave., Midland, TX 79701 | | Bobcat Draw; Upper Wolfcamp 98094 | |
| 4. Well Location | | | |
| Unit Letter <u>A</u> : <u>210</u> feet from the <u>North</u> line and <u>725</u> feet from the <u>East</u> line | | | |
| Section 35 | Township 25S Range | | MPM County Lea |
| | 11. Elevation (Show whether DR, | | |
| 3329' GR | | | |
| | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | |
| 12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | | | ALTERING CASING |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRIL | |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMENT | JOB 🗌 |
| DOWNHOLE COMMINGLE | | | |
| CLOSED-LOOP SYSTEM | | | |
| OTHER: | | OTHER: | |
| 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. | | | |
| | | | |
| COG Operating LLC respectfully requests to change the dedicated acres for this well | | | |
| COO Operating LEC respectfully requests to change the dedicated acres for tins well | | | |
| FROM: 240 | | | |
| | | | |
| TO: 960 | | | |
| | | | |
| Attached is the revised C102. | | | |
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| | ······································ | | |
| Spud Date: | Pig Palance Da | to | |
| Spud Date. | Rig Release Da | ie. | |
| | | | |
| | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | |
| | | | |
| SIGNATURE 10 418 | | Regulatory Analy | DATE 12/06/10 |
| SIGNATURE WAY | | Regulatory Allary | <u>DATE 12/06/19</u> |
| Type or print name Robyn M. Russell E-mail address: <u>Rrussell@concho.com</u> PHONE: (432) 685-4385 | | | |
| | | | |
| For State Use Only | | | |
| | | | |
| APPROVED BY: | TITLE | | DATE 12/09/19 |
| Conditions of Approval (if any): | | | |
| | | | |

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