<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(505) 393-6161 Fax:(505) 393-0720	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr.		Form C-103 Permit132282
District II 1301 W. Grand Ave., Artesia, NM 88210 Phone:(505) 748-1283 Fax:(505) 748-9720			WELL API NUMBER 30-015-38493
District III  1000 Rio Brazos Rd., Aztec, NM 87410  Phone:(505) 334-6178 Fax:(505) 334-6170  District IV	Santa Fe, NM 87505		5. Indicate Type of Lease S
1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462			6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name YALE STATE  8. Well Number 034
1. Type of Welt:O			
Name of Operator     COG OPERATING LLC			OGRID Number     229137
3. Address of Operator 550 W TEXAS, SUITE 1300, MIDLAND, TX 79701			10. Pool name or Wildcat
Section 2 Township 17S Range 30E NMPM Eddy County  11. Elevation (Show whether DR, KB, BT, GR, etc.)  3761 GR  Pit or Below-grade Tank Application or Closure  Pit Type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION PERFORM REMEDIAL WORK   PLUG A TEMPORARILY ABANDON   CHANC	N TO:		NT REPORT OF:  ALTER CASING
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
5/25/2011 Spudded well.			
5/25/11 Spud 17.5" hole @ 8:30PM.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE Electronically Signed		roduction Reporting Mgr	DATE 5/26/2011
Type or print name Diane Kuykendall E-mail address dkuykendall@conchoresources.com Telephone No. 432-683-7443			
For State Use Only: APPROVED BY: Randy Dade	TITLE Di	strict Supervisor	DATE 5/27/2011