

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720  
**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural**  
**Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

Form C-103  
August 1, 2011  
Permit 135363

|                                                                                                                                                                                                                                     |  |                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)                       |  | WELL API NUMBER<br>30-015-38088                    |
| 1. Type of Well: O                                                                                                                                                                                                                  |  | 5. Indicate Type of Lease<br>S                     |
| 2. Name of Operator<br>COG OPERATING LLC                                                                                                                                                                                            |  | 6. State Oil & Gas Lease No.                       |
| 3. Address of Operator<br>550 W TEXAS, SUITE 1300, MIDLAND, TX 79701                                                                                                                                                                |  | 7. Lease Name or Unit Agreement Name<br>FOLK STATE |
| 4. Well Location<br>Unit Letter <u>M</u> : <u>990</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>W</u> line<br>Section <u>17</u> Township <u>17S</u> Range <u>29E</u> NMPM <u>Eddy</u> County                      |  | 8. Well Number<br>003                              |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3631 GR                                                                                                                                                                        |  | 9. OGRID Number<br>229137                          |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>                                                                                                                                    |  | 10. Pool name or Wildcat                           |
| Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>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 TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
Other: \_\_\_\_\_

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTER CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐  
CASING/CEMENT JOB ☐  
Other: **Drilling/Cement** ☒

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.  
7/21/11 Spud 17-1/2 @ 12AM. TD 17-1/2 @ 375. Ran 9jts 13-3/8 H40 48# @ 375. Cmt w/200sx C. lead, 200sx C. tail. PD @ 3:53PM. Circ 166sx. WOC 18hrs. Test csg to 1500# for 30 min. ok.  
7/23/11 TD 11 @ 850. Ran 20jts 8-5/8 J55 24# @ 850. Cmt w/200sx C. lead, 200sx C. tail. PD @ 8:54AM. Circ 121sx. WOC 18hrs. Test csg to 775# for 30 min. ok.  
7/29/11 TD 7-7/8 @ 5115. Ran 120jts 5-1/2 J55 17# @ 5106. Cmt w/600sx C. lead, 400sx C. tail. PD @ 11:25PM. Circ 161sx. WOC 24hrs. 7/30/11 RR. Will test csg to 3500# for 30 min on completion rig.  
7/21/2011 Spudded well.

**Casing and Cement Program**

| Date     | String | Fluid Type | Hole Size | Csg Size | Weight lb/ft | Grade | Est TOC | Dpth Set | Sacks | Yield | Class | 1" Dpth | Pres Held | Pres Drop | Open Hole |
|----------|--------|------------|-----------|----------|--------------|-------|---------|----------|-------|-------|-------|---------|-----------|-----------|-----------|
| 07/21/11 | Surf   |            | 17.5      | 13.375   | 48           | H40   | 0       | 375      | 400   |       | C     |         |           |           | Y         |
| 07/23/11 | Int1   |            | 11        | 8.625    | 24           | J55   | 0       | 850      | 400   |       | C     |         |           |           | Y         |
| 07/29/11 | Prod   |            | 7.875     | 5.5      | 17           | J55   | 0       | 5106     | 1000  |       | C     |         |           |           | Y         |

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 \_\_\_\_\_ TITLE Production Reporting Mgr DATE 8/1/2011

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 District Supervisor DATE 8/8/2011 8:46:17 AM