

| District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-8161 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 174015 WELL API NUMBER 30-025-40855 5. Indicate Type of Lease S 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name BEBIDAS STATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|-------------------------------------|-----------------------|-----------------------|------------------------------|-----------------------|--------------------------|--------------------|--------------------------|---------------------|--------------------------|-----------------|--------------------------|----------------------|--------------------------|----------------|--------------------------|----------|------|---------------|--------------------------|--------|------|-------------------------|--------------------------|------|------|-------------------|--------------------------|--|------|-------------------------------|-------------------------------------|----------|------|--|-------|-------|----|-----|---|------|------|--|---|--|------|--|--|
| SUNDRY 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: O | | 8. Well Number 002H | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Name of Operator COG PRODUCTION, LLC | | 9. OGRID Number 217955 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. Address of Operator 600 W. Illinois Ave, Midland, TX 79701 | | 10. Pool name or Wildcat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Well Location Unit Letter <u>N</u> : <u>392</u> feet from the <u>S</u> line and feet <u>1887</u> from the <u>W</u> line Section <u>16</u> Township <u>23S</u> Range <u>33E</u> NMPM _____ County <u>Lea</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3715 GR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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 <table style="width:100%;"> <tr> <td colspan="2" style="text-align: center;">NOTICE OF INTENTION TO:</td> <td colspan="2" style="text-align: center;">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK</td> <td><input type="checkbox"/></td> <td>PLUG AND ABANDON</td> <td><input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON</td> <td><input type="checkbox"/></td> <td>CHANGE OF PLANS</td> <td><input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING</td> <td><input type="checkbox"/></td> <td>MULTIPLE COMPL</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other:</td> <td></td> <td>REMEDIAL WORK</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>COMMENCE DRILLING OPNS.</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>CASING/CEMENT JOB</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>Other: <u>Drilling/Cement</u></td> <td><input checked="" type="checkbox"/></td> </tr> </table> | | | NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | | PERFORM REMEDIAL WORK | <input type="checkbox"/> | PLUG AND ABANDON | <input type="checkbox"/> | TEMPORARILY ABANDON | <input type="checkbox"/> | CHANGE OF PLANS | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> | MULTIPLE COMPL | <input type="checkbox"/> | Other: | | REMEDIAL WORK | <input type="checkbox"/> | | | COMMENCE DRILLING OPNS. | <input type="checkbox"/> | | | CASING/CEMENT JOB | <input type="checkbox"/> | | | Other: <u>Drilling/Cement</u> | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | |
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| PERFORM REMEDIAL WORK | <input type="checkbox"/> | PLUG AND ABANDON | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TEMPORARILY ABANDON | <input type="checkbox"/> | CHANGE OF PLANS | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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. 09/02/13 TD 17 1/2" hole @ 1305'. Set 13 3/8" 54.5# J55 csg @ 1305'. Cmt w/ 1150 sx Class C. Tailed in w/ 250 sx. Circ 834 sx to surface. WOC 18 hrs. Tested csg to 1500#. Drilled out 5' below FS w/10# brine - no loss of circulation. 09/07/13 TD 12 1/4" hole @ 5055'. Set 9 5/8" 40# J55 csg @ 5055'. Set DVT @ 3818'. Cmt 1st stage w/ 200 sx class C. Tailed in w/ 250 sx. Cmt 2nd stage w/ 950 sx. Tailed in w/ 250 sx. Circ 15 sx to surface. WOC 18 hrs. Test csg to 1500# for 30 min. Drilled out 5' below FS w/10# brine - no loss of circulation. 9/1/2013 Spudded well. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Casing and Cement Program <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>String</th> <th>Fluid Type</th> <th>Hole Size</th> <th>Csg Size</th> <th>Weight lb/ft</th> <th>Grade</th> <th>Est TOC</th> <th>Dpth Set</th> <th>Sacks</th> <th>Yield</th> <th>Class</th> <th>1" Dpth</th> <th>Pres Held</th> <th>Pres Drop</th> <th>Open Hole</th> </tr> </thead> <tbody> <tr> <td>09/03/13</td> <td>Surf</td> <td></td> <td>17.5</td> <td>13.375</td> <td>54.5</td> <td>J55</td> <td>0</td> <td>1305</td> <td>1400</td> <td></td> <td>C</td> <td></td> <td>1500</td> <td></td> <td></td> </tr> <tr> <td>09/07/13</td> <td>Int1</td> <td></td> <td>12.25</td> <td>9.625</td> <td>40</td> <td>J55</td> <td>0</td> <td>5055</td> <td>1650</td> <td></td> <td>C</td> <td></td> <td>1500</td> <td></td> <td></td> </tr> </tbody> </table> | | | 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 | 09/03/13 | Surf | | 17.5 | 13.375 | 54.5 | J55 | 0 | 1305 | 1400 | | C | | 1500 | | | 09/07/13 | Int1 | | 12.25 | 9.625 | 40 | J55 | 0 | 5055 | 1650 | | C | | 1500 | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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 <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> . | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width:100%;"> <tr> <td>SIGNATURE</td> <td>Electronically Signed</td> <td>TITLE</td> <td>Production Reporting Manager</td> <td>DATE</td> <td>9/25/2013</td> </tr> <tr> <td>Type or print name</td> <td>DIANE KUYKENDALL</td> <td>E-mail address</td> <td>dkuykendall@concho.com</td> <td>Telephone No.</td> <td>432-685-4372</td> </tr> </table> | | | SIGNATURE | Electronically Signed | TITLE | Production Reporting Manager | DATE | 9/25/2013 | Type or print name | DIANE KUYKENDALL | E-mail address | dkuykendall@concho.com | Telephone No. | 432-685-4372 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Type or print name | DIANE KUYKENDALL | E-mail address | dkuykendall@concho.com | Telephone No. | 432-685-4372 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For State Use Only: <table style="width:100%;"> <tr> <td>APPROVED BY:</td> <td>ELIDIO GONZALES</td> <td>TITLE</td> <td>HOBBS STAFF MANAGER</td> <td>DATE</td> <td>9/26/2013 2:40:08 PM</td> </tr> </table> | | | APPROVED BY: | ELIDIO GONZALES | TITLE | HOBBS STAFF MANAGER | DATE | 9/26/2013 2:40:08 PM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Comments
Permit 174015

DRILLING COMMENTS

| | |
|--|--------------------------|
| Operator: COG PRODUCTION, LLC 600 W. Illinois Ave Midland, TX 79701 | OGRID: 217955 |
| | Permit Number: 174015 |
| | Permit Type: Drilling |

Comments

| Created By | Comment | Comment Date |
|---------------------------------------|---------|--------------|
| There are no Comments for this Permit | | |