

District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240District II – (575) 748-1283
811 S. First St., Artesia, NM 88210District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505State of New Mexico
Energy, Minerals and Natural ResourcesForm C-103
Revised July 18, 2013OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-45541
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VO-7477-1
7. Lease Name or Unit Agreement Name WAY SOUTH STATE COM
8. Well Number 701H
9. OGRID Number 229137
10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)

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: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		7. Lease Name or Unit Agreement Name WAY SOUTH STATE COM
2. Name of Operator COG OPERATING LLC		8. Well Number 701H
3. Address of Operator 2208 W Main St. Artesia, NM 88210		9. OGRID Number 229137
4. Well Location Unit Letter <u>H</u> : <u>265</u> feet from the <u>SOUTH</u> line and <u>630</u> feet from the <u>EAST</u> line Section <u>31</u> Township <u>26S</u> Range <u>28E</u> NMPM County <u>EDDY</u>		10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3081 GR		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input checked="" type="checkbox"/>	
COMMISSIONER OF PUBLIC LANDS APPROVAL	

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.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

THE STATE OF NEW MEXICO COMMISSIONER OF PUBLIC LANDS APPROVAL TO SURFACE COMMINGLE ON 08.26.20

Well API	Well Name	Location (NMPM)	Pool Code
30-015-45541	Way South State Com 701H	H-31-26S-28E	98220
30-015-45542	Way South State Com 702H	H-31-26S-28E	98220
30-015-45545	Way South State Com 705H	G-31-26S-28E	98220
30-015-45546	Way South State Com 706H	G-31-26S-28E	98220
30-015-45890	Way South State Com 709H	E-31-26S-28E	98220
30-015-45891	Way South State Com 710H	E-31-26S-28E	98220

SIGNATURE Jeanette Barron TITLE Regulatory Technician II DATE 09.14.20

Type or print name

Jeanette Barron E-mail address: jbarron@concho.com PHONE: 575-748-6974**For State Use Only**

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):