Submit 1 Copy To Appropriate District Office	State of New Mexico			Form C-103		
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources			Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283				WELL API NO. 30-015-37034		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of Lease		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE STATE FEE		
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505			6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
	CES AND REPORTS O	N WELLS		7. Lease Nam	ne or Unit Agreem	ent Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				MYOX 21 State Com		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)					,	••
1. Type of Well: Oil Well Gas Well Other				8. Well Number		
				8H		
2. Name of Operator				9. OGRID Number		
COG Operating LLC 3. Address of Operator				229137 10. Pool name or Wildcat		
2208 W. Main Street, Artesia, NM 88210				San Lorenzo; Bone Spring		
4. Well Location						
Unit Letter D :	660 feet from the	e <u>North</u>	line and 3	30 feet f	rom the Wes	t line
Section 21	Township 25		•	NMP		County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
3004' GR						
				1-2-702		
12. Check A	Appropriate Box to In	dicate Nature	of Notice, F	Report or Oth	ner Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ARANDON ALTERING CASING REMEDIAL WORK ARANDON REMEDIAL WORK R						
TEMPORARILY ABANDON						
DOWNHOLE COMMINGLE						
		•				
OTHER:			HER:	Temporarily		\boxtimes
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.						
proposed completion of rec	ompietion.					
•						
12/28/12 to 12/29/12 MIRU WSU.	ND WH & NU BOP.					
1/3/13 Release pkr & TOH w/production tbg.						
1/4/13 RU WL. Set CIBP @ 6300'	& dump 35' cmt on top.	TIH w/tbg to T	OC. Circ hole	w/pkr fluid.		•
•				F	DECE	VED
1/8/13 Test csg to 500# for 30 mins. RD & clean location.						
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Chart is attached.		Jnii c	a/,/20	015	"" -	
Chart is attached.		AI MM	(1110	C C C C C C C C C C C C C C C C C C C	NMOCD A	RTESIA
		1 Not 00	200 0/1	2010		,
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
Thereby certify that the information	. I de and comple	te to the best of	my knowledge	and belief.		
SIGNATURE STATES	TIT	LE: <u>Regula</u>	ntory Analyst		DATE: <u>1/9/</u>	13
Type or print name: Stormi Da	<u>/is </u>	nail address: <u>s</u>	davis@concho	.com	_ PHONE: <u>(575</u>	5) 748-6946
For State Use Only			,		<u> </u>	
101 State Ost Only				_	1	1.
APPROVED BY: RUHARP	/NUE TIT	TLE Compl	LIANCES C	OFFICER	DATE 1/18	/13 \
Conditions of Approval (if any):					- /	



