

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
RECEIVED
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
UNPLUGGED ARTESIA
 JAN 24 2013

Form C-103
 Revised August 1, 2011

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.)		WELL API NO. 30-015-40131
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator COG Operating LLC		6. State Oil & Gas Lease No.
3. Address of Operator One Concho Center, 600 W Illinois Avenue, Midland, TX 79701		7. Lease Name or Unit Agreement Name Clydesdale 1 Fee
4. Well Location Unit Letter <u>H</u> : <u>2260</u> feet from the <u>North</u> line and <u>150</u> feet from the <u>East</u> line Section <u>1</u> Township <u>19S</u> Range <u>25E</u> NMPM County <u>Eddy</u>		8. Well Number: 4H 9. OGRID Number: 229137
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3410' GR		10. Pool name or Wildcat Penasco Draw; San Andres, Yeso

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"/>		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 type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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.

9/07/12 Test csg to 2500# for 30 mins. DV tool @ 2411
 9/27/12 POP@7434, Port@7389, packer@7286, port@7148, packer@7018, port@6887, packer@6762, port@6636, packer@6507, port@6367, packer@6232, Port@6107, packer@5975, port@5841, packer@5708, port@5576, packer@5447, port@5316, packer@5194, port@5065, packer@4942, port@4802, packer@4669, port@4545, packer@4415, port@4275, packer@4152, port@4018, packer@3889, port@3755, packer@3661, port@3525, packer@3400. Acidize w/19,560 gal 15%. Frac w/1,255,768 gals of waterfrac, 575,969# 16/30 brown sand, 70,140# 100 mesh, 240,280# 16/30 SLC.
 10/03/12 Drill out frac balls.
 10/15/12 TIH w/71 jts 2 7/8 J55 tubing @ 2342, ESP pump. Turn well over to production.

Spud Date:

Rig Release Date:

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

SIGNATURE Brian Maiorino TITLE Regulatory Analyst DATE 1/14/13

Type or print name Brian Maiorino E-mail address: bmaiorino@concho.com PHONE: 432-221-0467

For State Use Only
 APPROVED BY [Signature] TITLE Dist # Supervisor DATE 1/31/13
 Conditions of Approval (if any):