

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

Form C-103  
 Revised August 1, 2011

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

RECEIVED  
 FEB 27 2013  
 NMOC D ARTESIA

WELL API NO.  
 30-015-31018  
 5. Indicate Type of Lease  
 STATE  FEE   
 6. State Oil & Gas Lease No.

**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  Gas Well  Other

2. Name of Operator  
 COG Operating LLC

3. Address of Operator  
 One Concho Center, 600 W. Illinois Avenue, Midland, TX 79701

4. Well Location  
 Unit Letter J : 1775 feet from the South line and 1650 feet from the East line  
 Section 16 Township 17S Range 30E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3675' GR

7. Lease Name or Unit Agreement Name  
 Imperial State

8. Well Number: 3

9. OGRID Number: 229137

10. Pool name or Wildcat  
 Loco Hills;Glorieta Yeso

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

<p><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <u>Deepen</u> <input checked="" type="checkbox"/></p>
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/15/13 set pkr @ 4250, test to 500# for 15 min, test good. Set Retainer @ 4216, squeezed perms w/600 sx cmt

1/16/13, drilled out cmt 4216-4902, test squeeze to 500# for 30 min, test good

1/22/13 drill formation, TD @5810, RIH w/135 jts P110 ULTFJ csg set @5806, cmt w/125 sx cmt, circ 66 sx to pit.

1/25/13 Drill out DV tool @4723, PBSD @5712

1/30/13 test csg to 5500 psi for 30 min, 8000 psi for 5 min, test good., Perf 5450-5650, 26 shots, 1spf, acidize w/1500 gal 15%, frac w/115,823 gals gel carrying 149,800# 16/30 brown w/25,137 16/30 sic, perf 5180-5380, 26 shots, 1spf, acidize w/2500 gal 15%, frac w/115588 gals gel carrying 143,075# 16/30 brown w/31382 16/30 sic, perf 4930-5130, 26 shots, 1spf, acidize w/2500 gal 15%, frac w/114,406 gals gel carrying 144,352# 16/30 brown w/33,372# 16/30 sic

2/11/13 Tag sand @5100, drill plugs and circ clean to PBSD @ 5720

2/18/13RIH w/BP @4647, 147 jts 2.875" tbg, RIH W/1-3/4" PUMP- 4' MASTER CENTRALIZER- RHR TOOL- 8-1-3/8" SB'S -104-3/4 N90 RODS- 68- 7/8" RODS- 8' 7/8" SUB, hang well, turn over to production.

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 2/26/13

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

**For State Use Only**

APPROVED BY: AP Dade TITLE Dist. A Supervisor DATE 2/27/13