

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 July 18, 2013

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

WELL API NO. 30-015-30941
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-742
7. Lease Name or Unit Agreement Name Mesquite State
8. Well Number 9
9. OGRID Number 229137
10. Pool name or Wildcat Empire;Glorieta-Yeso, East 96610

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
600 W. Illinois Ave, Midland, TX 79701

4. Well Location
 Unit Letter **D** : **890** feet from the **N** line and **480** feet from the **W** line
 Section **20** Township **17S** Range **29E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
5362' 3639'

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

- 4" *Notif, NMOCD 24hrs before MTRU*
- Set 5 1/2" CIBP @ ~~3835~~ *4390*. Circulate hole w/ MLF. Pressure test csg. Spot 35 sx cmt @ ~~3835-3546~~ *4390*. WOC & Tag (*open* DV Tool). *Perfs 4440-5200*
 - Spot 25 sx cmt @ 1722-1522'. (Queen) *4390'*
 - Perf & Sqz 50 sx cmt @ 865-700'. WOC & Tag (8 5/8" Shoe, Yates, B/Salt) *CIBP@ 3835 25sk cmt. WOC-Tag*
 - Perf & Sqz 100 sx cmt @ 412-Surface.
 - Cut off well head, verify cmt to surface, weld on Dry Hole Maker.

NM OIL CONSERVATION
 ARTESIA DISTRICT

APR 09 2018

RECEIVED

Spud Date:

Rig Release Date:

** See Attached COA's* *Must be Plugged by 4-10-19*
 I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Abigail Montgomery* TITLE *Agent* DATE *4/6/18*

Type or print name *Abigail Montgomery* E-mail address: *abbym@bernardassociates.com* PHONE: *432-580-7161*

APPROVED BY: *[Signature]* TITLE *Staff Mgr* DATE *4-10-18*

Conditions of Approval (if any):