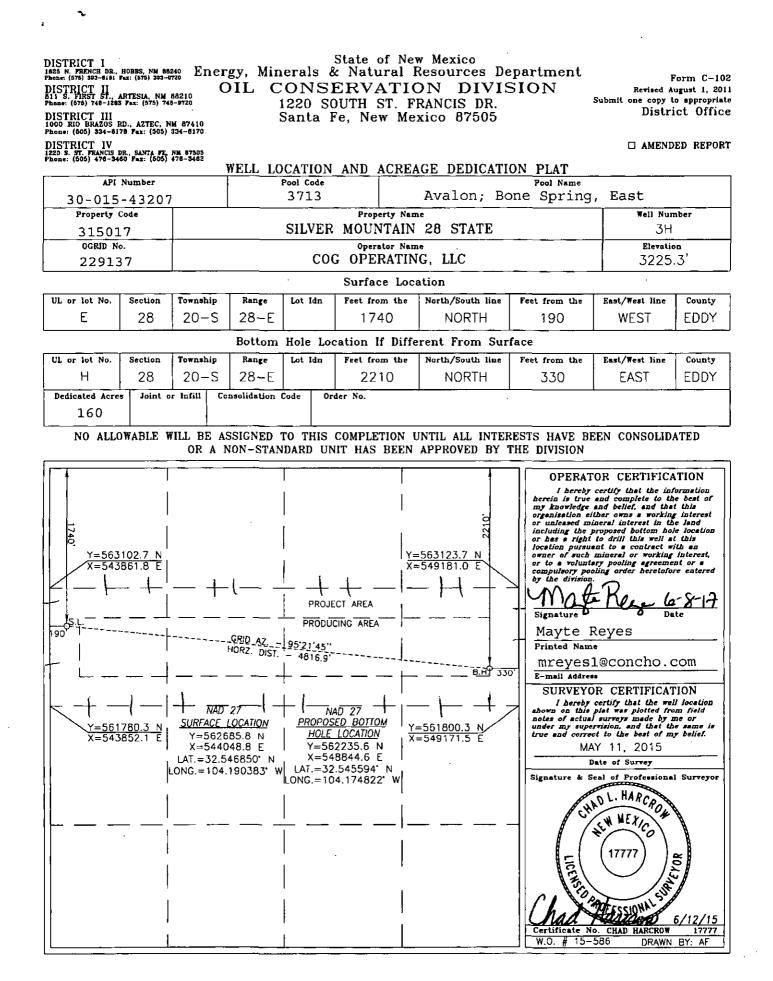
| a and a construction of the construction of th | | | | | |
|--|---|------------------------------|--|--------------------------------|--|
| Submit 1 Copy To Appropriate District Office | State of New Mexico Energy, Minerals and Natural Resources | | | Form C-103 October 13, 2009 | |
| District I 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Nat | urar Resources | WELL API NO. | | |
| District II | OIL CONSERVATION | N DIVISION | | 5-43207 | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | 1220 South St. Francis Dr. | | 5. Indicate Type of STATE | Lease FEE | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | Santa Fe, NM 87505 | | 6. State Oil & Gas | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | , | | | | |
| 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 | | | 7. Lease Name or Unit Agreement Name Silver Mountain 28 State | | |
| PROPOSALS.) | ALS.) | | | 8. Well Number 3H | |
| 2. Name of Operator | | | 9. OGRID Number | | |
| COG Operating LLC | | | 22 | 29137 | |
| 3. Address of Operator 2208 W. Main Street, Artesia, | NM 88210 | , . | 10. Pool name or W Avalon: Bo | /ildcat ne Spring, East | |
| 4. Well Location | | | , | | |
| Unit Letter <u>E</u> : | | line and0 | feet from the <u>W</u> | /estline | |
| Section 28 | | ange 28E | NMPM Eddy | County | |
| | 11. Elevation (Show whether DF 322 | R, RKB, RT, GR, etc !5.3' | | | |
| the Charle Assuration Device | | | | | |
| 12. Check Appropriate Box to | indicate Nature of Notice, K | eport or Other L | Jata | | |
| | NTENTION TO: | | BSEQUENT REP | | |
| | · _ | REMEDIAL WO | _ | | |
| TEMPORARILY ABANDON | | CASING/CEMEN | | AND A | |
| | | | | | |
| OTHER: X APD Extension | | OTHER: | | | |
| 13. Describe proposed or completed | d operations (Clearly state all part) | inont dotails, and gi | ve pertinent dates inclu | iding estimated date of | |
| starting any proposed work). S completion or recompletion. | EE RULE 19.15.7.14 NMAC. For | Multiple Completi | ons: Attach wellbore d | liagram of proposed | |
| COG Operating LLC respectfully re | aquests approval for a Yvear extens | yion on the above re | ferenced APD . UU | pues 7-9-2018 | |
| | quests approval for a great extens | | lerenced Ar D. C= 77 | | |
| C102 Attached. | | | | | |
| New C | expiration 7-9.2 | 2019 | NM (| DIL CONSERVATION | |
| | | | | | |
| | | | | APR 17 2018 | |
| ····· | | | | _ RECEIVED | |
| Spud Date: | Rig Release D | Date: | | | |
| | | | | | |
| | | | | | |
| I hereby certify that the information | above is true and complete to the t | best of my knowled | ge and belief. | | |
| SIGNATURE MINESS | Masquez TITLE: R | egulatory Assistant | DA | TE: <u>4/17/2018</u> | |
| Type or print name: <u>Genesis V</u> | asquez E-mail addres | ss: ggarzaperez@co | ncho.com PHONE: _ | <u>(575) 748-6926</u> | |
| For State Use Only | Klup TITIT Bru | sinessOpt | Son A DAT | E 4-97:2018 | |
| APPROVED BY: Multiple T Conditions of Approval (if any): | 111LE MA | manypr | pace in DAII | | |



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