

Submit 3 Copies to Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-015-28356
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name GR 30 STATE
8. Well Number 1
9. OGRID Number 229137
10. Pool name or Wildcat Nash Draw; Delaware

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
550 W. Texas Ave., Suite 1300 Midland, TX 79701

4. Well Location
Unit Letter C : 330 feet from the North line and 1980 feet from the West line
Section 30 Township 23S Range 30E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3078 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: Add & squeeze Delaware perms ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
- 9-6-06 TOH w/ rods, pump, and tbg. Set Composite BP @ 5810'. Perforate Delaware sand w/ 4 SPF @ 5634' - 5642' (8'). 33 total shots.
- 9-7-06 Set pkr @ 5548'. Swab well.
- 9-8-06 Acidize perms 5634' - 42' w/ 750 gal acid and 45 ball sealers. Flow & swab well.
- 9-13-06 Frac Delaware perms 5634' - 42' w/ 8000 gal Clearfrac fluid carrying 18,000# 20/40. Flow & swab well.
- 9-15-06 TOH w/ tbg & pkr. TIH w/ tbg & set tbg @ 5526'. RIH w/ pump & rods & turn to production.
- 10-18-06 TOH w/ pump & rods. Prepare to squeeze Delaware perms 5634' - 5642'.
- 10-20-06 Mix & pump 200sx CI C. 150 sx cmt under retainer. Reverse 50sx cmt out of tbg.
- 10-21-06 Drill out cmt to retainer @ 5570'.
- 10-23-06 Drill out 80' hard cmt. Circ sand off composite plug.
Pressure test squeeze perforations / composite plug / BOP to 1000 psi for 20 minutes - OK.
- 10-24-06 Drill composite plug. TOH w/ tbg. TIH w/ tbg, set @ 5924'. RIH w/ pump & rods. Turn to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Phyllis Edwards TITLE Regulatory Analyst DATE 10/27/06

Type or print name Phyllis Edwards E-mail address: pedwards@conchoresources.com Telephone No. 432-685-4340

For State Use Only

APPROVED BY: Accepted for record - NMOCD TITLE _____ DATE 10/30/06
Conditions of Approval (if any): _____