

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

WELL API NO. 30-015-03169	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-514	
7. Lease Name or Unit Agreement Name GJ West Coop Unit	
8. Well Number 16	
9. OGRID Number 229137	
10. Pool name or Wildcat Grayburg Jackson 7RVS-QN-G-SA/Empire; Yeso, East	
330 feet from the East line NMPM County Eddy	
distance from nearest surface water _____ Construction Material _____	

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, Suite 1300, Midland, TX 79701

4. Well Location

Unit Letter H 1650 feet from the North line and 330 feet from the East line
Section 28 Township 17S Range 29E NMPM County Eddy

I 1. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application	or Closure
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Pit type _____ Depth 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: Set RBP & produce from Yeso ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☐

OTHER: _____

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.

COG Operating LLC plans to set RBP @ 4600' & produce well from Yeso pool. Blinbry perfs will be left SI.



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 NMOC guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Stephen A. Edwards TITLE Regulatory Analyst DATE 10/31/06

Type or print name Phyllis A. Edwards E-mail address: pedwards@conchoresources.com Telephone No. (432)685-4340
For State Use Only Phyllis A. Edwards

APPROVED BY: Robert H. Depew TITLE _____ DATE 1/21/10
Conditions of Approval (if any): _____