

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

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

| |
|---|
| WELL API NO. 30-015-34742 |
| 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 Continental A State |
| 8. Well Number 11 |
| 9. OGRID Number 229137 |
| 10. Pool name or Wildcat Empire; Yeso (96210) |

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO 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 F : 1450' feet from the North line and 1907' feet from the West line
Section 30 Township 17S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3648' 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: | SUBSEQUENT REPORT OF: |
|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> |
| | OTHER: Add Additional Yeso Perfs. <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01/16/2007 Perforate @ 3926'-4277', 72 holes. Acidize w/2500 gals PPI/acid.
01/17/2007 Acidize w/30 bbls. 15% HCL. Frac w/500 gals. Technihib; 40,000 gals. 30# Linear Gel; 45,000 gals 40# Linear Gel; 8,000# LiteProp 125 14/30 snd; 75,780# 16/30 snd; 15,780# SiberProp 16/30 Resin Coated Snd; Flush w/90 bbls. 40# Linear Gel.
01/18/2007 RIH w/162 jts. 2 7/8" tbg., SN @ 5097'. RIH w/2 1/2"X2"X24' pump.

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 Carol Ann Lance TITLE Regulatory Analyst DATE 1/29/07

Type or print name Carol Ann Lance E-mail address: clance@conchoresources.com Telephone No. 432-685-4395

For State Use Only

APPROVED BY: Accepted for record - NMOCD TITLE _____ DATE 1/31/07
Conditions of Approval (if any): _____