

Office

Energy, Minerals and Natural Resources

Revised March 25, 1999

District I

1625 N. French Dr., Hobbs, NM 87210

District II

811 South First, Artesia, NM 87210

District III

1000 Rio Brazos Rd., Aztec, NM 87400

District IV

2040 South Pacheco, Santa Fe, NM 87505

RECEIVED

NOV - 7 2003

OC-D-ARTESIA

2040 South Pacheco

Santa Fe, NM 87505

WELL API NO.

30-015-32377

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
Crow Flats "11" State Com

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

Concho Resources Inc.

8. Well No. 2

3. Address of Operator 550 West Texas Avenue, Suite 1300

Midland, Texas 79701

9. Pool name or Wildcat
Diamond Mound-Morrow

4. Well Location

Unit Letter O : 660 feet from the South line and 1980 feet from the East line

Section 11

Township 16S

Range 28E

NMPM

County Eddy

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3447 GR

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOBS ☐

OTHER: Continue Spud ☒

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

10-13-03 Day 22: PTD 9,800'. Extend starting hole. Made 1' of hole from 48' to 49'

10-31-03 Day 23: Extend starting hole. Made 1' of hole from 49' to 50'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Brenda Coffman

TITLE Regulatory Analyst

DATE 11/04/2003

Type or print name Brenda Coffman

(This space for State use)

Jim W. Brown

District Supervisor

Telephone No. (432)685-4373

APPROVED BY

TITLE

DATE

NOV 12 2003

Conditions of approval, if any: