

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
 May 27, 2008

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



WELL API NO. **30-015-36495**

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
Houma State

8. Well Number **6**

9. OGRID Number
229137

10. Pool name or Wildcat **96718**
LOCO HILLS; GLORIETA-YESO

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)
JAN 08 2009

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 **E** : **2310** feet from the **North** line and **330** feet from the **West** line
 Section **16** Township **17S** Range **30E** NMPM County **EDDY**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3678' GR

Pit or Below-grade Tank Application or Closure
 Pit type **DRILLING** Depth to Groundwater **110'** Distance from nearest fresh water well **1000'** Distance from nearest surface water **1000'**
 Pit Liner Thickness: **12 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	Completion <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.

11-26-08 Perf Yeso w/ 2 SPF @ 5320 – 5520, 48 holes. Acidize w/ 60 bbls acid.
 Frac w/ 2,819 bbls gel, 178,684# sand. Set composite plug at 5250.
 Perf w/ 2 SPF @ 5020 - 5220. 32 holes. Acidize w/ 60 bbls acid.
 Frac w/ 2,803 bbls gel, 178,591# sand. Set composite plug at 4980.
 Perf w/ 2 SPF @ 4750 - 4950. 32 holes. Acidize w/ 72 bbls acid.
 Frac w/ 2,910 bbls gel, 204,653# sand.
 12/05/08 Drill out plugs. Clean out to PBTD 5970. RIH w/174jts 2-7/8" J55 tbg, SN @ 5568'. RIH w/ 2-1/2"x2"x20" RHTC pump.
 12/06/08 Hang on well.

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 *Robyn Odom* TITLE **Regulatory Analyst** DATE **01-02-09**

Type or print name **Robyn Odom** E-mail address: **rododom@conchoresources.com** Telephone No. **432-685-4385**

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):