

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

JUL 23 2009

Form C-103
May 27, 2004

RM

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

WELL API NO.	30-015-22368
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. V-5502	
7. Lease Name or Unit Agreement Name Maple State	
8. Well number 2	
9. OGRID Number	
10. Pool name or Wildcat Empire Yates Seven Rivers	

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,524' GR

Pit or Below-grade Tank Application ☒ or Closure ☐

Pit type STEEL Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water N/A

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

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
C.O.G. Operating L.L.C

3. Address of Operator
550 W. Texas Ste. 1300 Midland, TX 79701

4. Well Location
Unit Letter D : 380 feet from the North line and 380 feet from the West line
Section 30 Township 17-S Range 28-E NMPM County Eddy

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 checked="" 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"/>	

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.
- 1) 7/8/09 Contact Sherry Bonham-OCD of MIRU. Trip Rig to location & SDFD.
7/9/09 Complete MIRU. ND WH & NU BOP. Pull & laydown rods & tbg. Set 7" CIBP @ 348'. Circ. hole clean. Mix & spot 85sx cmt. ND BOP. Top off casg. Well P&A. RDMO.
- 2)

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 Gary Eggleston TITLE Supervisor DATE 7/19/2009

Type or print name Gary Eggleston

For State Use Only

APPROVED BY: [Signature] TITLE DATE 7/23/09

Conditions of Approval (if any):

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms. www.cranrd.state.nm.us/oed.