

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-103  
May 27, 2004

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

WELL API NO 30-015-25610
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.

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)		<b>RECEIVED</b> <b>APR 19 2010</b> <b>NMOCD ARTESIA</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	7. Lease Name or Unit Agreement Name GJ West Coop Unit	
2. Name of Operator COG Operating LLC	8. Well Number 82	
3. Address of Operator 550 W. Texas Ave , Suite 1300 Midland, TX 79701	9. OGRID Number 229137	
Well Location Unit Letter <u>N</u> . <u>990'</u> feet from the <u>South</u> line and <u>2303'</u> feet from the <u>West</u> line Section <u>21</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u>		10. Pool name or Wildcat <b>97558</b> <b>GJ; 7RVS-QN-GB-Glorieta-Yeso</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc ) 3590' GR		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>		<input checked="" type="checkbox"/> OTHER Refrac	

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.

2/19/10 RIH w/ RBP. Set @ 4296. Dump 2 sx sand on top.  
2/24/10 RIH w/ 3-1/2 pkr. Set @ 3925.  
3/2/10 Paddock perms @ 3970-4250 w/ 1SPF, 29 holes. Acidize w/ 3,000 gals acid. Refrac w/ 164,431 gals gel, 208,674# 16/30 Ottawa sand, 29,129# 16/30# CRC.  
3/8/10 RIH w/ 127 jts 2-7/8" tbg, SN @ 4183'.  
3/9/10 RIH w/ 2-1/2 x 1-1/2 x 16 pump. Hang on well.

Accepted for record  
NMOCD  
4/20/10

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 C Jackson TITLE Agent for COG DATE 4/13/10

Type or print name Chasity Jackson E-mail address: cjackson@conchoresources.com Telephone No 432-686-3087  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): \_\_\_\_\_