

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. 30-015-37525 |
| 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 Kool Aid State |
| 8. Well Number 18 |
| 9. OGRID Number 229137 |
| 10. Pool name or Wildcat 96210 Empire; 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.) | |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | |
| 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 : 1650' feet from the North line and 1650' feet from the West line Section 24 Township 17S Range 28E NMPM County EDDY | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3705' 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: _____ Below-Grade Tank: Volume _____ bbls; Construction Material _____ | |

12. 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 COMPL ☐

OTHER: **Change casing program** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

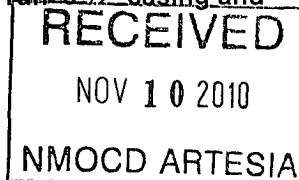
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

COG Operating LLC respectfully requests permission to change the casing program to:

| Type | Hole Size | Casing Type | Casing Weight/ft. | Setting Depth | Sacks of Cement | Est TOC |
|-------|--------------|-------------|-------------------|---------------|-----------------|---------|
| Surf | 17.5 | 13.375 | 48 | 250 | 300 | 0 |
| Inter | 11 or 12-1/4 | 8.625 | 24 | 850 | 400 | 0 |
| Prod | 7.875 | 5.50 | 17 | 5400 | 900 | 0 |

COG proposes to drill 17-1/2" hole to 250' w/ fresh water mud system, wt. 8.5, vis 28, set 13-3/8" casing & cement to surface. Drill 11" or 12-1/4" hole to 850' w/ brine mud system, wt 10, vis 30, set 8-5/8" casing & cement to surface. Drill 7 7/8" hole to 5400' w/ cut brine mud system, wt 9.1, vis 29-32, test Yeso formation and run 5 1/2" casing and cement to surface.

Note: On production string, a fluid caliper will be run, COG will attempt to circulate cement.



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 M. Odom TITLE Regulatory Analyst DATE 11-09-2010

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

For State Use Only
APPROVED BY: David Gray TITLE Field Supervisor DATE 11-15-10

Conditions of Approval (if any):

Cement must be circulated on surf. csg.