

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 33543

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: ☐		WELL API NUMBER 30-025-37788
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
2. Name of Operator COG OPERATING LLC		7. Lease Name or Unit Agreement Name CHOLLA STATE
3. Address of Operator 550 W TEXAS, , SUITE 1300 MIDLAND, TX 79701		8. Well Number 001
4. Well Location Unit Letter <u>N</u> : <u>380</u> feet from the <u>S</u> line and <u>1650</u> feet from the <u>W</u> line Section <u>4</u> Township <u>17S</u> Range <u>33E</u> NMPM Lea County		9. OGRID Number 229137
11. Elevation (Show whether DR, KB, BT, GR, etc.) 4194 GR		10. Pool name or Wildcat
Pit or Below-grade Tank Application ☐ or Closure ☐ 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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Drilling/Cement** ☒

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.

5/20/2006 Spud 17 1/2 hole.

5/21/2006 TD 17 1/2 hole @ 360'. Ran 8jts 13 3/8 H-40 48# @ 353', Cmt w/375sx C, plug down 3:30pm, circ 36sx. WOC 18hrs test to 1800# 30min, OK.

5/27/2006 TD 12 1/4 hole @ 2960'. Ran 69jts 8 5/8 J-55 24# @ 2960', Cmt w/1000sx C, 350sx C, circ 150sx, plug down 7:00pm. WOC 12hrs test to 600# 20min, OK.

6/11/2006 TD 7 7/8 hole @ 7800'.

6/14/2006 Ran 175jts 5 1/2 J-55 17# @ 7794', Cmt 1st Stage w/580sx C, 2nd Stage w/740sx 35/65/6, 930sx C, plug down 3:40am, circ 186sx. WOC 12hrs test to 600# 20min, OK. 5/20/2006 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
05/21/06	Surf	FreshWater	17.5	13.375	48	H-40	0	353	375		C		1800	0	Y
05/27/06	Int1	Brine	12.25	8.625	24	J-55	0	2960	1350		C		600	0	Y
06/13/04	Prod	CutBrine	7.875	5.5	17	J-55	0	7794	2250		C		600	0	Y

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 Electronically Signed

TITLE Regulatory Analyst

DATE 7/5/2006

Type or print name Diane Kuykendall

E-mail address dkuykendall@conchoresources.com

Telephone No. 432-685-4372

For State Use Only:

APPROVED BY: Paul Kautz

TITLE Geologist

DATE 7/6/2006 9:30:50 AM