

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 66956

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: ☐ 2. Name of Operator COG OPERATING LLC 3. Address of Operator 550 W TEXAS, , SUITE 1300 MIDLAND, TX 79701 4. Well Location Unit Letter <u>H</u> : <u>1650</u> feet from the <u>N</u> line and <u>990</u> feet from the <u>E</u> line Section <u>16</u> Township <u>17S</u> Range <u>32E</u> NMPM Lea County 11. Elevation (Show whether DR, KB, BT, GR, etc.) 4062 GR		WELL API NUMBER 30-025-38589
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LEAKER CC STATE		
8. Well Number 001		
9. OGRID Number 229137		
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.
12/05/07 Sp 17-1/2 @ 5:30pm. 12/07/07 TD 17-1/2 @ 672'. Ran 16jts 13-3/8 H40 48# @ 671'. Cmt w/600sx C, 200sx C. PD @ 10:00am. Circ 300sx. WOC 18hrs. Test csg to 1800# for 30min, ok. 12/10/07 TD 12-1/4 @ 2166'. Ran 50jts 8-5/8 J55 32# @ 2165'. Cmt w/700sx C, 200sx C. PD @ 2:00pm. Circ 320sx. WOC 12hrs. Test csg to 600# for 30min, ok. 12/18/07 TD 7-7/8 @ 7020'. 12/20/07 Ran 156jts 5-1/2 L80 17# @ 7009'. Cmt w/800sx C, 400sx C. PD @ 3:30am. Circ 169sx. WOC 12hrs. Test csg to 600# for 30 min, ok. RR. 12/5/2007 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
12/07/07	Surf		17.5	13.375	48		0	671	800		C				Y
12/10/07	Int1		12.25	8.625	32		0	2165	900		C				Y
12/20/07	Prod		7.875	5.5	17		0	7009	1200		C				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 1/4/2008

Type or print name Diane Kuykendall E-mail address dkuykendall@conchoresources.com Telephone No. 432-683-7443

For State Use Only:

APPROVED BY: Paul Kautz TITLE Geologist DATE 1/7/2008 9:03:08 AM