

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 89675

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 30-025-39028
		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 LEAKER CC STATE
3. Address of Operator 550 W TEXAS, , SUITE 1300 MIDLAND, TX 79701		8. Well Number 017
4. Well Location Unit Letter <u>H</u> : <u>2310</u> feet from the <u>N</u> line and <u>330</u> feet from the <u>E</u> line Section <u>16</u> Township <u>17S</u> Range <u>32E</u> NMPM Lea County		9. OGRID Number 229137
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3576 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.
1-16-09 Spud 17-1/2" @ 4 PM. TD 17-1/2 @ 671'.
1-17-09 Ran 15 jts 13-3/8 H40 48# STC csg set @ 671. Cmt w/400sx C lead & 200sx C tail. PD @ 8:00pm. Circ 180 sx. WOC 18 hrs. Test csg to 1800# for 30 min-OK.
1-18-09 TD 11" @ 2206.
1-19-09 Run 54 jts 8-5/8 32# J55 STC csg set @ 2206'. Cmt w/400 sx C lead & 200 sx C tail. PD @ 3:30am. Circ 105 sx. WOC 12 hrs. Test csg to 600# for 30 min-OK.
1-26-09 TD 7-7/8" @ 6988.
1-28-09 Ran 153 jts 5-1/2 L80 17# csg set @ 6971. Cmt w/800 sx C lead & 400 sx C tail. Circ 137 sx. WOC 12 hrs. Test csg to 600# for 30 min-OK. RR.
1/16/2009 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
01/17/09	Surf		17.5	13.375	48		0	671	600						
01/19/09	Int1		11	8.625	32		0	2206	600						
01/28/09	Prod		7.875	5.5	17		0	6971	1200						

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 2/10/2009
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 2/10/2009 2:33:11 PM