

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 95247

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.)		WELL API NUMBER 30-015-36999
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
1. Type of Well: O	7. Lease Name or Unit Agreement Name G J WEST COOP UNIT	8. Well Number 214
2. Name of Operator COG OPERATING LLC	9. OGRID Number 229137	10. Pool name or Wildcat
3. Address of Operator 550 W TEXAS , , SUITE 1300 MIDLAND , TX 79701		
4. Well Location Unit Letter <u>D</u> : <u>990</u> feet from the <u>N</u> line and <u>330</u> feet from the <u>W</u> line Section <u>16</u> Township <u>17S</u> Range <u>29E</u> NMPM <u>Eddy</u> County		
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3589 GR.		
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.
04/23/09 Spud 17-1/2" @9:30pm. TD 17-1/2" @ 330'. Ran 8jts 13-3/8 H40 48# @ 330'. Cmt w/ 180sx C. 300sx BJ Lite. 400sx C. Did not circ. Run Temp Survey TOC@180'. 1" to surface and pump 149sx to reach surface. Circ 10sx WOC 18hrs. Tested Casing to 1800# for 30 min, ok.
04/25/09 TD 11" @ 843'. Ran 20jts 8-5/8 J55 24# @ 843'. Cmt w/ 200sx C. 200sx C. PD @ 11:00PM. Circ 23sx. WOC 12hrs. Test Casing to 600# for 30 min, ok. 04/30/09 TD 7-7/8" @ 5543'.
05/01/09 Ran 132jts 5-1/2 J55 17# @ 5542'. Cmt w/ 600sx C. 400sx C. PD @ 11:15AM. Circ 197sx. WOC 12hrs. Tested csg to 600# for 30min, ok. RR.
4/23/2009 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
04/23/09	Surf		17.5	13.375	48	H40	0	330	1004		C				Y
04/25/09	Int1		11	8.625	24	J55	0	843	400		C				Y
04/30/09	Prod		7.875	5.5	17	J55	0	5543	1000		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 5/12/2009

Type or print name Diane Kuykendall

E-mail address dkuykendall@conchoresources.com

Telephone No. 432-683-7443

For State Use Only:

APPROVED BY: Jacqueta Reeves

TITLE District Geologist

DATE 5/12/2009 1:55:54 PM