

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 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
August 1, 2011

Permit 169786

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.)		WELL API NUMBER 30-025-40919
1. Type of Well: O		5. Indicate Type of Lease P
2. Name of Operator COG OPERATING LLC		6. State Oil & Gas Lease No.
3. Address of Operator One Concho Center, 600 W. Illinois Ave, Midland, TX 79701		7. Lease Name or Unit Agreement Name TAYLOR D
4. Well Location Unit Letter <u>L</u> : <u>2310</u> feet from the <u>S</u> line and <u>990</u> feet from the <u>W</u> line Section <u>10</u> Township <u>17S</u> Range <u>32E</u> NMPM Lea County		8. Well Number 027
11. Elevation (Show whether DR, KB, BT, GR, etc.) 4128 GR		9. OGRID Number 229137
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: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: Drilling/Cement <input checked="" type="checkbox"/>

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.
 6/11/13 Spud 17-1/2 @ 8:15PM. 6/12/13 TD 17-1/2 @ 833. Ran 19jts 13-3/8 H40 48# @ 833. Cmt w/450sx C. lead, 200sx C. tail. PD @ 11:06PM. Circ 154sx. WOC 12hrs. Test csg to 1200# for 30min ok.
 6/14/13 TD 11 @ 2409. Ran 55jts 8-5/8 J55 32# @ 2409.
 6/15/13 Cmt w/500sx C. lead, 200sx C. tail. PD @ 6:48AM. Circ 59sx. WOC 18hrs. Test csg to 1500# for 30 min, ok.
 6/18/13 TD 7-7/8 @ 7009.
 6/19/13 Ran 160jts 5-1/2 L80 17# @ 6995. Cmt w/700sx C. lead, 400sx C. tail. PD @ 1:15PM. Circ 166sx. WOC 24hrs. RR. Will test csg to 5000# for 30 min on completion rig. 6/11/2013 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
08/12/13	Surf		17.5	13.375	48	H40	0	833	650		C				Y
08/14/13	Int1		11	8.625	32	J55	0	2409	700		C				Y
08/19/13	Prod		7.875	5.5	17	L80	0	6995	1100		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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Production Reporting Mgr DATE 7/10/2013

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 7/11/2013 8:40:29 AM