Submit 1 Copy To Appropriate District Office	S	State of New Mexi	co	Form C-103		
District I – (575) 393-6161	Energy, Minerals and Natural Resources			Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
<u>District II</u> – (575) 748-1283 811 S. First St , Artesia, NM 88210	OIL CONSERVATION DIVISION			30-015-39105		
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.			5. Indicate Type of Lease		
1000 Rio Brazos Rd , Aztec, NM 87410	Santa Fe, NM 87505			STATE FEE 6. State Oil & Gas Lease No.		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr , Santa Fe, NM				o. State Off & C	Jas Lease No.	
87505						
		ORTS ON WELLS	DAGE TO A	7. Lease Name	or Unit Agreem	nent Name
(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				Diamondback 22 State Com		
PROPOSALS.)						
1. Type of Well: Oil Well Gas Well Other				8. Well Number		
2. Nome of Oresisters				2H		
2. Name of Operator COG Production LLC				9. OGRID Number 217955		
3. Address of Operator				10. Pool name or Wildcat		
2208 W. Main Street, Artesia, NM 88210				Delaware River; Bone Spring		
4. Well Location				Dolawar		Pring
	. 500 fo.	at from the North	. line and	590 foot 6	ana tha Wa	lin .
Unit Letter D: 580 feet from the North line and						
Section 22	ction 22 Township 26S Range 28E 11. Elevation (Show whether DR, RKB, RT, GR, etc.				Eddy	County
	11. Elevation	Show whether DR, R) 2981' G				
	<u> </u>		N.			
Cl 1			CAT	D / 0.1	.	
12. Check A	Appropriate Bo	ox to Indicate Nati	are of Notice,	Report or Othe	r Data	
NOTICE OF IN	ATENTION TO	0.	SLIB	SEQUENT R	EDORT OF	
PERFORM REMEDIAL WORK			REMEDIAL WOR			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A						
PULL OR ALTER CASING			CASING/CEMENT		IANDA	
DOWNHOLE COMMINGLE			DAGING/OLIVIEN	1 300		
BOWN TOLE COMMITTEE						
OTHER:			OTHER: S	et tubing & pacl	ker	\bowtie
13. Describe proposed or com	pleted operations.	(Clearly state all per				estimated date
of starting any proposed w		E 19.15.7.14 NMAC.	For Multiple Cor	npletions: Attach	ı wellbore diagr	am of
proposed completion or re-	completion.					
					DECI	EIVED
2/6/12 Set 2.7/9" 6.5# I.55 that & n	der @ 6028;				HEUL	
2/6/12 Set 2 7/8" 6.5# J-55 tbg & pkr @ 6038'.					FFR 1	1 0 2012
					1	[O FOIL
					NMOCD	ARTESIA
					11111000	,
•						
Smud Data: 6/30/1	1	DI D. 1		8/5/11		
Spud Date: 6/30/1		Rig Release Date	•	5,5,11		
I hereby certify that the information	above is true and	d complete to the best	of my knowledg	e and belief.		
N	•	•	, ,			
0						
SIGNATURE STORY	acrus	TITLE: Reg	ulatory Analyst		DATE: <u>2/8/</u>	12
Type or print name: Stormi Da	ivis	E-mail address:	sdavis@conche	o.com	PHONE: (575	5) 748-6946
					11101111. 1011	., , 10 0740
For State Use Only	1	a	-			1
APPROVED BY:	(Ll	TITLE DIST	the Dour	<u> </u>	DATE OJ 60	1/2017
Conditions of Approval (if any):	_	IIILL O	- you	L	AIL OF	1001
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