Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.	
1625 N. French Dr , Hobbs, NM 88240 District II		30-015-30831		
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE	
District IV	Santa Fe, NM 87505		6. State Oil & Gas I	Lease No.
1220 S. St Francis Dr., Santa Fe, NM 87505				
	ICES AND REPORTS ON WELLS		7. Lease Name or U	Init Agreement 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				_
PROPOSALS.)				er State
1. Type of Well: Oil Well Gas Well Other			8. Well Number	
2. Name of Operator			9. OGRID Number	
COG Operating LLC			229137	
3. Address of Operator			10. Pool name or Wildcat	
550 W. Texas Ave., Suite 100 Midland, TX 79701			Loco Hills; Glorieta Yeso	
4. Well Location				
Unit Letter P:	430 feet from the South	line and <u>330</u>	feet from the <u>East</u>	line
Section 16	Township 17S Range	30E NMPM		ty
A Company of the Comp	11. Elevation (Show whether DR,	RKB, RT, GR, etc.,		
3677' GR				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN	SEQUENT REPO	ORT OF:		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK				LTERING CASING
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRIL			LLING OPNS. P	AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	T JOB 🔲	
DOWNHOLE COMMINGLE				
OTHER:	П	OTHER:	Pool Change	×
	pleted operations. (Clearly state all p			
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
COG Operating LLC respectfully request to have this well's pool changed from the Loco Hills (96718) to				
	the Mar Loco; Glorie	eta-Yeso (97866		<del></del>
			RECEIVED	
MAR <b>1 3</b> 2012				3 2012
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			NMOCD A	HIESIA
				7
Spud Date:	Rig Release Da	ite:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE TITLE Permitting Tech DATE 03/14/2012				
SIGNATURE TITLE Permitting Tech DATE 03/14/2012				
Type or print name Kelly J. H.	olly E-mail address: khol	ly@concho.com	PHONE: 432-685	<u>i-4384</u>
For State Use Only				
APPROVED BY: / WM MAR 1 5 2012				
APPROVED BY:	MININAL TILE ()	1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	DAII	~
Conditions of Approval (if any).	/	1/		