	C 103
	Form C-103 June 19, 2008
[WELL API NO.
	30-015-34871
ļ	5. Indicate Type of Lease
	STATE FEE
	6. State Oil & Gas Lease No.
	7. Lease Name or Unit Agreement Name
	Harper State
	8. Well Number
	11
	9. OGRID Number
	229137
	10. Pool name or Wildcat Loco Hills; Glorieta Yeso
	Loco miis, Giorieta Teso
	fact from the First 150-
	feet from the <u>East</u> line Eddy County
<u>Л</u> с.)	
)	
3: Ri	Report or Other Data SEQUENT REPORT OF: K
	Pool Change d give pertinent dates, including estimated date tach wellbore diagram of proposed completion
a1	nged from the Loco Hills (96718) to
(CEIVED
	R 13 2012
<u>C</u>	D ARTESIA
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State of New Mexico Office Energy, Minerals and Natural Resources District I 1625 N. French Dr., Hobbs, NM 88240 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave, Artesia, NM 88210 1220 South St. Francis Dr. District III 1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe, NM 87505 District IV 1220 S St Francis Dr , Santa Fe, NM 87505 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.) 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator **COG Operating LLC** 3. Address of Operator 550 W. Texas Ave., Suite 100 Midland, TX 79701 4. Well Location : 865 feet from the Unit Letter line and 330 South Section 16 Township 17S 30E Range **NMPN** 11. Elevation (Show whether DR, RKB, RT, GR, etc. 3680' GR 12. Check Appropriate Box to Indicate Nature of Notice. NOTICE OF INTENTION TO: SUE PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN DOWNHOLE COMMINGLE \Box OTHER: OTHER: 13. Describe proposed or completed operations. (Clearly state all pertinent details, as of starting any proposed work). SEE RULE 1103. For Multiple Completions: A or recompletion. COG Operating LLC respectfully request to have this well's pool characteristics. the Mar Loco; Glorieta-Yeso (9786 NMO Spud Date: Rig Release Date: 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 Type or print name E-mail address:

kholly@concho.com

TITLE

PHONE: 432-685-4384

MAR 1 5 2012

Submit 3 Copies To Appropriate District

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Conditions of Approval (if any):

APPROVED BY: