Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	June 19, 2008
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II	OIL CONSERVATION DIVISION	30-015-37351
1301 W Grand Ave , Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd, Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Salita i C, ivivi 67505	6. State Oil & Gas Lease No. Federal Lease #NMLC 029020G
87505		
	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)	CHIONION CONTROL (1014) CONTROL	Dexter Federal
1. Type of Well: Oil Well 🔯	Gas Well Other	8. Well Number
		10
2. Name of Operator		9. OGRID Number
COG Operating LLC		229137
3. Address of Operator 550 W. Texas Ave., Suite 100 Midland, TX 79701		10. Pool name or Wildcat Loco Hills; Glorieta Yeso
		Loco mis, Giorieta Teso
4. Well Location		
Unit Letter I: 1485 feet from the South line and 865 feet from the East line		
Section 22	Township 17S Range 30E NMPN	
Company of the second	11. Elevation (Show whether DR, RKB, RT, GR, etc.	2.)
	3651' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
TEMPORARILY ABANDON	= 1	RILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	
DOWNHOLE COMMINGLE		
OTHER:	CT OTHER	5 100
	OTHER:	Pool Change
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.		
COG Operating LLC resu	ectfully request to have this well's pool ch	anged from the Loco Hills (96718) to
	the Mar Loco; Glorieta-Yeso (<u>9786</u>	
		RECEIVED
	17	IECEIVED
		MAAD 1 9 2012
		MAR 1 3 2012
	NIA	OCD ARTESIA
	ISAIN	IOCD ATTESIM
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 LALL CONTROLL TITLE Permitting Tech DATE 03/13/2012		
Type or print name Kacie Connally E-mail address: kconnally@concho.com PHONE: 432-221-0336		
For State Use Only		
APPROVED BY: 1 () MANN THE GAN / WICT 2/14/70/1		
APPROVED BY: C. JULY TITLE OOLOJS DATE S/7/1011 Conditions of Approval (if any):		