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	87,	WELL API NO.		
District II	OIL CONCEDUATION DIVISION	30-015-32755		
1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease Federal		
District III	1220 South St. Francis Dr.	STATE FEE		
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S St Francis Dr., Santa Fe, NM				
87505		Federal Lease # NMLC028784B		
SUNDRY NOTICE	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSAI	LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			
DIFFERENT RESERVOIR USE "APPLICAT	Burch Keely Unit			
PROPOSALS)		8. Well Number		
1. Type of Well: Oil Well 🕅 Ga	8. Well Number 227			
2. Name of Operator	9. OGRID Number			
COG Opera	229137			
3. Address of Operator	10. Pool name or Wildcat			
550 W. Texas Ave.,	Grayburg Jackson;SR-Q-G-SA 28509			
4. Well Location				
Unit Letter G : 1980 fe	et from the <u>Nor+h</u> line and <u>1975</u> feet from t	the EAST line		
Section 23 To	wnship $17S$ Range $Z9\overline{E}$ NMPM	Eddy County		
	11. Elevation (Show whether DR, RKB, RT, GR, etc 3597 GR			
1997 - Marine Marine,				

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:PERFORM REMEDIAL WORKPLUG AND ABANDONTEMPORARILY ABANDONCHANGE PLANSPULL OR ALTER CASINGMULTIPLE COMPLDOWNHOLE COMMINGLE		SUBSEQ REMEDIAL WORK COMMENCE DRILLING CASING/CEMENT JOB		IG 🗌
OTHER: 13. Describe proposed or completed operations. (Clearly	state all p	OTHER: pertinent details, and give	Pool Change pertinent dates, including estimation	Ated date

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 Grayburg Jackson;SR-Q-G-SA (28509) to the Burch Keely-Glorieta-Upper Yeso (97918) in accordance with Order # R-10067-E.

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Spud Date:	Rig Relea	se Date:		
I hereby certify that the information above is tr	ue and complete to	the best of my knowledge and	l belief.	
SIGNATURE Kici	TITLE	Lead Regulatory Analyst	DATE	4/23/12
Type or print name Kanicia Castillo	E-mail address:	kcastillo@concho.com	PHONE: <u>432-685</u>	-4332_
For State Use Only APPROVED BY: Conditions of Approval (if any):	TITLE	UPERVISOR, DISTRICT II		6/05/2012