

Submit 1 Copy To Appropriate District Office  
 District I – (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II – (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III – (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV – (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised August 1, 2011

OIL CONSERVATION DIVISION  
 1220 South 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-40646
2. Name of Operator COG Operating LLC		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator One Concho Center, 600 W. Illinois Avenue, Midland, TX 79701		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>L</u> : 1950 feet from the <u>South</u> line and <u>990</u> feet from the <u>West</u> line Section <u>27</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u>		7. Lease Name or Unit Agreement Name GJ West Coop Unit
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3532 GR		8. Well Number <u>293H</u>
9. OGRID Number 229137		10. Pool name or Wildcat GJ;7R-QN-GB-Glorieta-Yeso (97558)

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Completion <input checked="" type="checkbox"/>

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/06/13 Rig up.  
 3/07/13 RIH w/4-3/4" bit. Tag DVT @ 3947. Test csg to 1500#, good test. Drill out DVT. Drill out sub. RIH to 4151, circ clean.  
 3/12/13 MIRU Pacesetter to open toe and acidize. Acidize w/300 gals 15% NEFE HCL, flush w/2% KCL.  
 3/14/13 - 3/15/13 Acidize w/ 46,730 gals 15% NEFE and Frac 22 stages w/1,719,293 gals gel, 185,850 gals WF, 136,057# 100 Mesh, 1,825,250# 16/30 Brady Snd, 299,955# 16/30 CRC.

See Attachment for Sleeve and Packer depths, 4929 – 10,103. POP @ 10,144.

3/22/13 – 3/28/13 Drilled out sleeves. Circ well clean to PBTD @ 10,144.  
 4/02/13 RIH w/108jts 2-7/8, 6.5# J55 tbg. EOT @ 3837'.  
 4/03/13 Hooked up ESP pump. Turn over to production. (No production) WOO.  
 4/14/13 RU, pulled tbg.  
 4/16/13 MIRU Airfoam unit. Circ hole.  
 4/18/13 PU SN. RIH w/SN @ 3982. RU swab line. Made several runs, lowered SN to 4293. 100%wtr.  
 4/22/13 Made several runs, dry. POOH LD WS. SI well. WOO.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Lead Regulatory Analyst DATE 09/06/13

Type or print name Kanicia Castillo E-mail address: kcastillo@concho.com PHONE: 432-685-4332

For State Use Only

APPROVED BY: [Signature] TITLE Asst. Reg. Supervisor DATE 9/12/2013  
 Conditions of Approval (if any):