

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
NM OIL CONSERVATION
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr 2014
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2011

RECEIVED

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
**One Concho Center
 600 W. Illinois Ave.
 Midland, TX 79701**

WELL API NO.
 30-015-40923

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
 Cadillac State

8. Well Number
 2

9. OGRID Number
 229137

10. Pool name or Wildcat
 Empire; Glorieta-Yeso, East 96610

4. Well Location
 Unit Letter **K** ; **2185** feet from the **South** line and **1700** feet from the **West** line
 Section **15** Township **17S** Range **29E** NMPM **Eddy** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3568'

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

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

9/30/14 Test csg to 3500# for 30min. Ok. Perf 4 stages @ 5048 - 5300. w/1 SPF, 26 holes. CBP @ 5030.
 Perf @ 4750 - 5000 w/1SPF, 26 holes, CBP @ 4725.
 Perf @ 4450 - 4700 w/1SPF, 26 holes, CBP @ 4350.
 Perf @ 4025 - 4300 w/1SPF, 26 holes. Acidize 4 stages w/3,610 gals 15% HCL. Frac w/490,658 gals gel, 597,466# 16/30 brady sand, 136,690# 16/30 SLC.

10/8/14 Drill out plugs. Clean out to PBTD 5420.

10/11/14 RIH w/163jts 2-7/8" J55 6.5# tbg, EOT @ 5402. RIH w/2-1/2 x 1-3/4 x 20' RHBC pump. Turn well over to production.

Spud Date: 9/10/14 Rig Release Date: 9/17/14

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

SIGNATURE C. Jackson TITLE Regulatory Analyst DATE 11/4/14

Type or print name Chasity Jackson E-mail address: cjackson@concho.com PHONE: 432-686-3087
For State Use Only

APPROVED BY: Dr. P. Sepewis TITLE Dr. P. Sepewis DATE 11/13/2014

Conditions of Approval (if any):