

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

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

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-015-03068
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator COG Operating LLC		6. State Oil & Gas Lease No. Federal Lease No. NMLC028784B
3. Address of Operator One Concho Center, 600 W. Illinois Avenue, Midland, TX 79701		7. Lease Name or Unit Agreement Name Burch Keely Unit
4. Well Location Unit Letter <u>M</u> : <u>660</u> feet from the <u>South</u> line and <u>560</u> feet from the <u>West</u> line Section <u>24</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u>		8. Well Number <u>113</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>229137</u>
		10. Pool name or Wildcat SWD; Upper Penn

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

NOTICE OF INTENTION TO: 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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: 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: <u>MIT</u> <input checked="" type="checkbox"/>	
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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.

5/04/2018 MI STONE PUMP TRUCK, PJSM, JSA, PRESSURE CSG TO 500 PSI, HOLD AND RECORD ON CHART FOR 30 MINUTES, BLEED PRESSURE OFF, OCD ON LOCATION, ACIDIZE VIA 2 7/8 TBG, WITH 4500 GALS 15% HCL DOUBLE INHIBITED ACID, 2 BPM @ 900 PSI, FLUSH WITH 54 BBLs PRODUCED WATER 2 BPM @ 1200 PSI, ISIP 800 PSI, SECURE WELL, LET ACID SOAK FOR 4 HOURS

RECEIVED

MAY 14 2018

DISTRICT II-ARTESIA O.C.D.

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 Dana King TITLE Permit Specialist II DATE 5/09/18

Type or print name Dana King E-mail address: dking@concho.com PHONE: (432) 818-2267

For State Use Only

APPROVED BY: Russell New TITLE COMPLIANCE OFFICER DATE 5/16/18
 Conditions of Approval (if any):