

DEC 0 6 2018

| Submit One Copy To Appropriate District | State of New Mexico | | | | | orm C-103 | |
|--|--|----------------|--|--|-------------------------|--|--|
| Office District I | Energy, Minerals and Natural Resources | | | | O.C.D. January 20, 2011 | | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | | WELL API NO. | | | |
| <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | 30-015-39265 | | | |
| District III | 1220 South St. Francis Dr. | | | 5. Indicate Type of Lease 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 | | | | o. State On | a Gus Leuse 140. | | |
| 87505 | ES AND DEDODTS O | NIWEIIC | | 7 Lagga N | ama an I Init A anaam | ant Nama | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | 7. Lease Name or Unit Agreement Name Crypt 30 State | | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | | | 8. Well Number 2H | | | |
| PROPOSALS.) 1. Type of Well: ⊠Oil Well ☐ Gas Well ☐ Other | | | | | | | |
| 2. Name of Operator | | | | 9. OGRID Number | | | |
| COG Operating LLC | | | | 229137 | | | |
| 3. Address of Operator | | | | 10. Pool name or Wildcat | | | |
| 600 W. Illinois Ave., Midland Texas 79701 | | | | Wildcat G-01 S192617Kl Glor-Yeso | | | |
| 4. Well Location | | | | | | | |
| Unit Letter C: 150 feet from | om the <u>North</u> line and <u>J</u> | 700 feet fr | om the West line | | | | |
| Section 30 Township 198 | Range <u>26E</u> NMPN | 1 C | ounty <u>Eddy</u> | | | | |
| | 11. Elevation (Show w | hether DR, | RKB, RT, GR, etc.) | | | | |
| 12. Check Appropriate Box to | 3394' GR | Notice D | amant an Othan D | oto. | | ——— <u>—</u> | |
| 12. Check Appropriate Box to | indicate Nature of | Nouce, R | eport or Other D | ala | | | |
| NOTICE OF INT | | | SUBS | SEQUENT | REPORT OF: | | |
| | PLUG AND ABANDON | | REMEDIAL WORK | | ☐ ALTERING C | | |
| | | | | | | \boxtimes | |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/CEMENT | JOB | | | |
| OTHER: | | | X Location is res | adw for OCF | inspection after P | 8 /8 | |
| All pits have been remediated in o | compliance with OCD | rules and th | | | | | |
| Rat hole and cellar have been filled | | | | | | | |
| A steel marker at least 4" in diam | | | | | | | |
| OPERATOR NAME, LEAS UNIT LETTER, SECTION | | | | | | <u>on or</u> | |
| PERMANENTLY STAMP | | | | <u>IN HAS DEF</u> | IN WELDED OR | | |
| | | | | | | | |
| ☐ The location has been leveled as r | | | | | of all junk, trash, flo | w lines and | |
| other production equipment. | cing - Tru | Lah. | 6 . 1 . 1 | | | | |
| other production equipment. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with | | | | | | | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed | | | | | | | |
| | | 4 | | | - | | |
| from lease and well location. All metal bolts and other materials | have been removed. | Portable bas | ses have been remov | ed. (Poured | onsite concrete base | s do not have | |
| to be removed.) All other environmental concerns | T. Post | OCD | 1 | | | | |
| ✓ All other environmental concerns✓ Pipelines and flow lines have been | | | | All fluide he | wa haan ramowad fr | om non | |
| retrieved flow lines and pipelines. | ii abandoned iii accord | ance with i | 9.13.33.10 NWAC. | All Hulus III | ive been temoved if | om non- | |
| ☑ If this is a one-well lease or last re | emaining well on lease | , all electric | al service, poles and | l lines, not to | include primary se | rvice | |
| company equipment, has been remove | | | , . | | . , | .6.1 | |
| When all work has been completed, re | turn this form to the ap | propriate D | istrict office to sche | dule an insp | ection. | | |
| |) ^ | | | | | | |
| SIGNATURE MULTA | MALAN I | TITLE On | erations Engineering | r Tach | DATE <u>12/3/1</u> | · ************************************ | |
| SIGNATURE CIRCLE | <u> </u> | TITLE OU | | z i ech | DAIE 12/3/1 | 0 | |
| | | | crations Lingineering | | | _ | |
| TYPE OR PRINT NAME Onetha | Aaron | | oaaron@concho.con | | PHONE: <u>432-</u> | _ | |
| TYPE OR PRINT NAME Onetha For State Use Only | Aaron | | oaaron@concho.con | n | PHONE: 432- | _ | |
| For State Use Only | Aaron ENIED | | | n | PHONE: <u>432-</u> | <u>818-2319</u> | |