

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 July 18, 2013

RECEIVED CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
FEB 25 2019

WELL API NO. 30-015-04166
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-936
7. Lease Name or Unit Agreement Name ETZ State Unit
8. Well Number 110
9. OGRID Number 229137
10. Pool name or Wildcat GRBG-Jackson, SR-Q-GRBG-SA

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
600 W. Illinois Ave, Midland, TX 79701

4. Well Location
 Unit Letter **K** : **1650** feet from the **S** line and **1980** feet from the **W** line
 Section **16** Township **17S** Range **30E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3670' GR

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 checked="" 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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

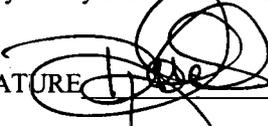
08/14/18 MIRU plugging equipment. ND pump jack head, lock out/tagged out. POH w/ 114 3/4" rods & pump. Dug out cellar. NU BOP. Circulated hole w/ water to work tbg free. 08/15/18 Cut 2 3/8" tbg @ 2512', POH w/ 79 jts. Notified OCD that well has 5" csg. Circulated hole w/ Salt gel. Pressure tested csg, held 0 psi. Spotted 40 sx class C cmt @ 2500-2027'. WOC. 08/16/18 Tagged plug @ 2120'. Pressure tested csg, held 500 psi. Perf'd csg @ 1100'. Sqz'd 50 sx class C cmt @ 1100-950'. WOC. Tagged plug @ 945'. Perf'd csg @ 482', established injection rate, could not circulate. ND BOP. Pump'd 2 bags of LCM in perfs, waited 30 minutes. Sqz'd 120 sx class C cmt @ 482' & displaced to 100'. WOC. 08/17/18 Tagged plug @ 280'. Perf'd csg @ 280', pressured up on perfs to 500 psi. Perf'd csg @ 100'. Pump'd 30 bbls H2O, did not circulate. Spotted 25 sx class C cmt w/ 2 bags LCM @ 280'. Waited 30 minutes. Sqz'd 50 sx class C cmt @ 100' to surface. Rigged down & moved off. 08/20/18 Moved in backhoe and welder. Dug out cellar. Cut off well head. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Cut off deadmen. Cleaned location, moved off.

ENTERED
 2/26/19

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 

TITLE Regulatory Technician

DATE 2/21/2019

Type or print name Delilah Flores
For State Use Only

E-mail address: dflores2@concho.com

PHONE: 575-748-6946

APPROVED BY: 
 Conditions of Approval (if any):

TITLE Staff Ms

DATE 2/26/19