

Submit 3 Copies to Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO.

30-015-32257

5. Indicate Type of Lease **FEDERAL**
STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
JENKINS B FEDERAL

8. Well Number **14**

9. OGRID Number
229137

10. Pool name or Wildcat

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 **Water Injection**

2. Name of Operator

COG Operating LLC

3. Address of Operator

550 W. Texas Ave., Suite 1300 Midland, TX 79701

4. Well Location

Unit Letter **D** : **745** feet from the **North** line and **990** feet from the **West** line
Section **20** Township **17S** Range **30E** NMPM **Eddy** County

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

3639

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: **Convert to injection** ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

08/15/07 Release pump, LDrods & pump. MIRU reverse unit, frac tank. Pump 60 bbls LSW via annulus. ND larkin type head. Release tubing anchor. NU BOP. Release TA. Tally out 149 jts 2 7/8" tbg. SIFN.

08/16/07 SICP - 60 psi. PU 4 3/4" bit, casing scraper. TIH to 4,732'. Pump 200 bbls LSW, no circ. TOOH. PU K-3 pkr. Set packer @ 4,200'. Load annulus and test casing to 500 psi w LSW. Acidize perforations w 2,500 gal acid. Release packer, LD tbg. SIFN.

08/17/07 ISIP - 55 psg. PU PL WLRG, PL Arrowset I packer, PL XO, PL 2.25" SN, 132 jts PL 2 7/8" 6.5# EUE J-55 tbg. Set packer @ 4,189' in 12K tension. Load annulus with fresh water/packer fluid. RD WSU, equipment.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Phyllis Edwards TITLE Regulatory Analyst DATE 8/24/07

Type or print name Phyllis Edwards

E-mail address: pedwards@conchoresources.com Telephone No. 432-685-4340

For State Use Only

APPROVED BY: Richard Inas TITLE COMPLIANCE OFFICER DATE 9/4/2007
Conditions of Approval (if any):

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SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: **MIT TEST & CHART** ☒

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8-20-07 OCD Field Inspector District II representative Richard Inge ran successful MIT.
COG representative Morris Keith witnessed test.
Chart is attached.

TD
4732

PKR DEPTH
4189

BARRELS INJECTING
500

RATE
500

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SIGNATURE Phyllis Edwards TITLE Regulatory Analyst DATE 8/24/07

Type or print name Phyllis Edwards

E-mail address: pedwards@conchoresources.com Telephone No. 432-685-4340

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____

INITIAL TEST
30 MINUTES

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC MP-2000

30-015
METER 32257

COG
OPERATING

TAKEN OFF
8:50 A.M.

CHART PUT ON
8:00 A.M.

LOCATION Jenkins B Federal #14
REMARKS 9.2" wtr. Bradenhead

open
5 1/2" csg.

8:00 AM MONDAY AUGUST 20, 2

MONDAY AUGUST 20, 2007

Morris Keith

6 PM