

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

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

WELL API NO. 30-015-25431
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1266
7. Lease Name or Unit Agreement Name GJ West Coop Unit
8. Well Number 72
9. OGRID Number 229137
10. Pool name or Wildcat Grayburg Jackson ; 7RVS-QN-G-SA/Empire ;Yeso,East

<p>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)</p>	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator COG Operating, LLC	
3. Address of Operator 550 W. Texas Suite 1300 Midland, TX 79701	
<p>4. Well Location</p> <p>Unit Letter <u>F</u> <u>2360</u> feet from the <u>North</u> line and <u>1350</u> feet from the <u>West</u> line</p> <p>Section <u>22</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u></p>	
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3541' GR</p>	
<p>Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/></p>	
<p>Pit type <u> </u> Depth Groundwater <u> </u> Distance from nearest fresh water well <u> </u> Distance from nearest surface water <u> </u></p>	
<p>Pit Liner Thickness: <u> </u> mil Below-Grade Tank: Volume <u> </u> bbls; Construction Material <u> </u></p>	

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>OTHER: <u> </u> <input type="checkbox"/></p>		<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <u>Amended Completion</u> <input checked="" type="checkbox"/></p>	
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

11-12-85 Perfed from 2659-3292. Acidized perms w/4000 gals 10% NE.
11-14-85 Frac perms 2659-3292 w/320,000 gals gel, 500sx 20/40, 3000sx 12/20, 1000sx 8/16 sand.
11-16-85 Put well on production.

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 MOC guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Diane Kuykendall TITLE Production Analyst DATE 9/3/06

Type or print name Diane Kuykendall E-mail address: dkuykendall@conchoresources.com Telephone No. (432) 683-7443

For State Use Only

FOR RECORDS ONLY

APPROVED BY: TITLE DATE JUL 11 2006

Conditions of Approval (if any):