

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



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|---|
| WELL API NO. 30-015-35946 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name Continental A State |
| 8. Well Number 13 |
| 9. OGRID Number 229137 |
| 10. Pool name or Wildcat Empire; Glorieta - Yeso 96210 |

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|--|----------------------------|
| 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | |
| 2. Name of Operator COG Operating LLC | MAR 26 2008 OCD-ARTESIA |
| 3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, TX 79701 | |
| 4. Well Location Unit Letter <u>E</u> : <u>1650</u> feet from the <u>North</u> line and <u>330</u> feet from the <u>West</u> line Section <u>30</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u> | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3663' GR | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> | |
| 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: Completion ☒

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.

01/31/08 Perforate @ 5170 - 5370, 48 holes, 2 SPF.
02/01/08 Acidize w/5,500 gals acid. Frac w/ 71,148 gals gel, 13,401# SiberProp 71,835# 16/30. Set plug @ 5140.
Perforate @ 5000 - 5100, 36 holes, 2 SPF. Acidize w/6,000 gals acid.
Frac w/ 43,222 gals gel, 8,615# SiberProp 35,139# 16/30. Set plug @ 4950.
Perforate @ 4700 - 4900, 36 holes, 2 SPF. Acidize w/6,500 gals acid.
Frac w/ 73,676 gals gel, 15,381# SiberProp 74,506# 16/30. Set plug @ 4650.
Perforate @ 4416 - 4616, 36 holes, 2 SPF. Acidize w/5,000 gals acid.
Frac w/ 56,158 gals gel, 10,407# SiberProp 70,251# 16/30.
02/05/08 Drilled out plugs and washed to PBTD 5586'.
02/12/08 RIH w/150 jts 2 7/8" tbg, SN @ 4325.13'. RIH w/ 2 1/2x2x20' RHTC pump.

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE  TITLE Regulatory Analyst DATE 03/14/08

Type or print name Kanicia Carrillo E-mail address: kcarrillo@conchoresources.com Telephone No. 432-685-4332
For State Use Only

APPROVED BY: _____ TITLE Accepted for record DATE _____
Conditions of Approval (if any): NMOC