Office Office	State of 1	New Me	X1CO			Form C-103
<u>Distric I</u>				May 27, 2004		
1625 N. French Dr., Hobbs, NM 88240 District II	strict II			WELL API NO. 30-015-35421		
1301 W. Grand Ave, Artesia, NM 88210 OIL CONSERVATION DIVIS				5. Indicate Type		FEDERAL
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410			STATE		EE 🗌	
District IV Santa Fe, NM 8/505				6. State Oil & C	as Lease N	lo.
1220 S. St. Francis Dr., Santa Fe, NM 87505						
	ES AND REPORTS ON			7. Lease Name	or Unit Agi	reement Name
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA				D		1
PROPOSALS.)				Rudolph Federal 8. Well Number 2		
	Gas Well Other	- JUN	0 6 2008			
2. Name of Operator				9. OGRID Num	ber 229137	
3. Address of Operator	o operating LLO	UUU	-ARTESIA	10. Pool name o	 	
550 W. Texas Ave., Suite	1300 N	lidland,	TX 79701	Crow F	lats; San	Andres
4. Well Location				I.		
Unit Letter <u>O</u> :	990' feet from the S	outh	line and	feet from the	<u>East</u>	line
Section 21	Township	16S	Range 28E	NMPM	(County EDDY
	11. Elevation (Show wh		•			
Pit or Below-grade Tank Application or	Closure 🗆	3605	GR			
Pit type DRILLING Depth to Ground		om negrest	fresh water well 100	N' Distance from no	rost surface	water 1000
	Below-Grade Tank: Volume	om nearest	bbls; Construction	_	ii est sui iace	water 1000
		1' . > 7				
12. Check A ₁	ppropriate Box to Inc	dicate N	ature of Notice,	Report or Othe	r Data	
NOTICE OF INT	ENTION TO:		SUB	SEQUENT RE	PORT (OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON			REMEDIAL WORK ☐ ALTERING CASING ☐			
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. P AND A			
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	TJOB 🗌		
OTHER: Drill with closed	loon system	\boxtimes	OTHER:			m
13. Describe proposed or comple				l give pertinent da	tes, includi	ng estimated date
of starting any proposed wor						
or recompletion.						
COG Operating LLC	respectfully requests	permiss	on to drill this well	with a closed to	oop syster	n.
	-					
						
I hereby certify that the information al	pove is true and complete	e to the be	st of my knowledge	e and belief. I furt	her certify th	at any pit or below-
grade tank has been/will be constructed or cl		_			native OCD-	approved plan ∐.
SIGNATURE hyllis	, Elward	ELE_	Regulatory Analy	<u>yst</u>	_DATE	6-4-08
					_	
	rds E-mail address: p	edwards	@conchoresour	ces.com Telep	hone No.	432-685-4340
For State Use Only						
APPROVED BY:	7	TITLE			DATE	
Conditions of Approval (if any):						