Somit 3 Copies 10 Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources			Form C-103 May 27, 2004			
1625 N. French Dr., Hobbs, NM 88240	6,,			WELL API NO.			
District II 1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			30-015-35359 5. Indicate Type of Lease FEDERAL			
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			5. Indicate Type of Lease FEDERAL STATE FEE			
District IV	Santa Fe,	NM 87505	G		il & Gas Lease		
1220 S St. Francis Dr., Santa Fe, NM 87505							
SUNDRY NOTICES AND REPORTS ON WELLS					7. Lease Name or Unit Agreement Name		
(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				D 111-4			
PROPOSALS.)	<u></u>	JUN 062		8. Well Nu	R J Unit	150	
Type of Well: Oil Well Name of Operator	Gas Well Other					130	
	COG Operating LLC OCD-ARTESIA				9. OGRID Number 229137		
3. Address of Operator				10. Pool name or Wildcat			
550 W. Texas Ave., Suite 1300 Midland, TX 79701				Grayburg Jackson SR Q G SA			
4. Well Location							
Unit Letter <u>G</u> :	1980' feet from the N				om the Eas	 .	
Section 27		17S Range		NM	PM	County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3553' GR							
Pit or Below-grade Tank Application	or Closure 🗌	<u> </u>		- <u> </u>	<u> </u>		
Pit type DRILLING Depth to Grou	ındwater 115' Distance fro	m nearest fresh wa	ter well <u>100</u>	0' Distance fr	om nearest surfac	e water <u>1000</u>	
Pit Liner Thickness: 12 mil	Below-Grade Tank: Volume	bbls;	Construction	n Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data							
	NTENTION TO:	П РЕМЕ	SUB DIAL WOR		T REPORT	OF: ING CASING □	
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐	PLUG AND ABANDON CHANGE PLANS			N LLING OPNS	_		
PULL OR ALTER CASING		_ :	NG/CEMEN				
_				*			
OTHER: Drill with close		OTHE		4 -:	ant datas inclus	ling actions to did at a	
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.							
-							
COG Operating L	LC respectfully requests	permission to c	Irill this wel	ll with a clo	sed loop syste	m.	
I hereby certify that the information	shows in two and complete	to the best of m	v lenovyloda	o and haliaf	Y 64146.	that any pit on below	
grade tank has been/will beconstructed o	r closed according to NMOCD g	uidelines 🔲, a gene	y knowledg ral permit 🔲	e and bener. or an (attached	alternative OCI	D-approved plan	
	- 61		_				
SIGNATURE / Juglies	(award)	TILE Regu	latory Ana	lyst	DATE_	6-4-08	
Type or print name Phyllis Edv	wards E-mail address: pe	edwards@con	choresou	rces.com	Telephone No.	432-685-4340	
For State Use Only					F		
ADDOUGD DV	-	ינידיני די			· n ame		
APPROVED BY: Conditions of Approval (if any):	1	TTLE			DATE		
COMMITTED OF THE LITTLE AND LOCAL CONTRACTOR							