

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

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

RECEIVED
 NOV 13 2019
 HOBBS OGD

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.)		WELL API NO. 30-025-41525
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> State Oil & Gas Lease No.
2. Name of Operator COG OPERATING LLC		7. Lease Name or Unit Agreement Name NORTH LUSK 32 STATE SWD
3. Address of Operator 2208 W Main St. Artesia, NM 88210		8. Well Number 1
4. Well Location Unit Letter <u>K</u> : <u>1550</u> feet from the <u>SOUTH</u> line and <u>1800</u> feet from the <u>WEST</u> line Section <u>32</u> Township <u>18S</u> Range <u>32E</u> NMPM LEA County		9. OGRID Number 229137
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		10. Pool name or Wildcat SWD;DEV-FUS-MON-SIMP-ELL

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> SHUT IN	
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

This well was shut-in as soon as we identified that it had a mechanical integrity issue and it will stay out-of-service until it is repaired. COG Operating, LLC is in the process of transferring operatorship of this well to Solaris Water Midstream who plans to repair the well as soon as the change of operatorship is finalized and approved.

SIGNATURE Jeanette Barron TITLE Regulatory Technician II DATE 11.12.19
 Type or print name

Jeanette Barron E-mail address: jbarron@concho.com PHONE: 575-748-6974
For State Use Only

APPROVED BY: Kerry Fute TITLE C.O. A DATE 11-13-19
 Conditions of Approval (if any)