

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 36660

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: ☐		WELL API NUMBER 30-025-37789
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
2. Name of Operator COG OPERATING LLC		7. Lease Name or Unit Agreement Name BARREL STATE
3. Address of Operator 550 W TEXAS, , SUITE 1300 MIDLAND, TX 79701		8. Well Number 001
4. Well Location Unit Letter <u>M</u> : <u>330</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>W</u> line Section <u>3</u> Township <u>17S</u> Range <u>33E</u> NMPM Lea County		9. OGRID Number 229137
11. Elevation (Show whether DR, KB, BT, GR, etc.) 4169 GR		10. Pool name or Wildcat
Pit or Below-grade Tank Application ☐ or Closure ☐ 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 OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Drilling/Cement** ☒

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.
7-20-06 Spud 17-1/2 @ 11:00pm. 7-21-06 TD 17-1/2 @ 365'. Ran 9jts 13-3/8" H40 @ 365'. Cmt w/400sx C. PD @ 10am. Circ 50 sx.
WOC 18 hrs. Test csg to 1800# for 30 min-OK.
7-26-06 TD 12-1/4" @ 2955'. Ran 68jts 8-5/8" J55 @ 2952'. Cmt w/1000sx 36/65/6 C. Tail w/350sx C. PD @ 6:30am. Circ 175 sx.
WOC 12hrs. Test csg to 600# for 20min-OK.
8-15-06 TD 7-7/8" @ 7351'.
8-18-06 Ran 166jts 5-1/2" 17# J55 @ 7346'. Cmt 1st stg w/ 390 sx 50/50/2 C. Cmt 2nd stg w/1600sx 50/50/2 C. PD @ 11:30am. Circ 102sx. WOC 12hrs. Test csg to 600# for 20 min-OK. 7/20/2006 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
07/21/06	Surf		17.5	13.375	48		0	365	400		C				Y
07/26/06	Int1		12.25	8.625	32		0	2955	1350		C				Y
08/18/06	Prod		7.875	5.5	17		0	7346	1990		C				Y

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

SIGNATURE Electronically Signed

TITLE Regulatory Analyst

DATE 8/24/2006

Type or print name Diane Kuykendall

E-mail address dkuykendall@conchoresources.com

432-685-4372

For State Use Only:

APPROVED BY: Paul Kautz

TITLE Geologist

DATE 8/25/2006 7:46:55 AM