

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

Form C-103
Permit 108734

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

WELL API NUMBER 30-015-37436
5. Indicate Type of Lease S
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name G J WEST COOP UNIT
8. Well Number 250
9. OGRID Number 229137
10. Pool name or Wildcat

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: O

2. Name of Operator
COG OPERATING LLC

3. Address of Operator
550 W TEXAS , SUITE 1300 , MIDLAND , TX 79701

4. Well Location
Unit Letter D : 330 feet from the N line and 990 feet from the W line
Section 21 Township 17S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3598 GR

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.
01/21/10 Spud 17-1/2" @ 1:45pm. TD 17-1/2" @ 364'. Ran 9jts 13-3/8 H40 48# @ 364'. Cmt w/ 180sx C lead, 200sx C. 400sx tail. PD @ 11:00pm. Circ 365sx. WOC 12 hrs. Test csg to 840# for 30 min., ok.
01/22/10 TD 11" @ 859'. Ran 19jts 8-5/8 J55 24# @ 859'. Cmt w/ 180sx C., 200sx C., 200sx C. plus add 200sx C. plus add. PD @ 9:30pm. Circ 554sx. WOC 18 hrs. Test csg to 2000# for 30 min, ok.
01/26/10 TD 7-7/8" @ 5545'. Ran 124jts 5-1/2 J55 17# @ 5530'. Cmt w/ 550sx C. lead, 400sx C. tail.
01/27/10 PD @ 12:25am. Circ 224sx WOC 24hrs. RR Will test csg to 3500# for 30 min on completion rig.
1/21/2010 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
01/21/10	Surf		17.5	13.375	48	J55	0	364	780		C				Y
01/22/10	Int1		11	8.625	24	J55	0	859	780		C				Y
01/26/10	Prod		7.875	5.5	17	J55	0	5530	950		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 1/29/2010

Type or print name Diane Kuykendall E-mail address dkuykendall@conchoresources.com Telephone No. 432-683-7443

For State Use Only:
APPROVED BY: Jacqueta Reeves TITLE District Geologist DATE 2/2/2010 9:42:06 AM