

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 121257

|                                                                                                                                                                                                                                                                                                                                         |  |                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)                                                                                                                           |  | WELL API NUMBER<br>30-015-37561                            |
| 1. Type of Well: O                                                                                                                                                                                                                                                                                                                      |  | 5. Indicate Type of Lease<br>S                             |
| 2. Name of Operator<br>COG OPERATING LLC                                                                                                                                                                                                                                                                                                |  | 6. State Oil & Gas Lease No.                               |
| 3. Address of Operator<br>550 W TEXAS, SUITE 1300, MIDLAND, TX 79701                                                                                                                                                                                                                                                                    |  | 7. Lease Name or Unit Agreement Name<br>G J WEST COOP UNIT |
| 4. Well Location<br>Unit Letter <u>I</u> : <u>1650</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>E</u> line<br>Section <u>16</u> Township <u>17S</u> Range <u>29E</u> NMPM <u>Eddy</u> County                                                                                                                         |  | 8. Well Number<br>242                                      |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3555 GR                                                                                                                                                                                                                                                                            |  | 9. OGRID Number<br>229137                                  |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ |  | 10. Pool name or Wildcat                                   |

**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.

9/22/10 Spud 17-1/2" @ 1:30PM. TD 17-1/2" @ 362'. Ran 8jts 13-3/8 H40 48# @ 362'. Cmt w/400sx C. PD @ 11:03pm. Did not circ. NMOCD directed top out w/Readymix cmt. Topped out w/7yards readymix cmt. WOC 14.5 hrs. Test csg to 557psi for 30 min., ok.

9/23/10 TD 11" @ 858'. Ran 20jts 8-5/8 J55 24# @ 858'. Cmt w/300sx C. lead, 200sx C. tail. 9/24/10 PD @ 2:19am. Circ 216sx. WOC 18 hrs. Test csg to 2000# for 30 min, ok.

9/29/10 TD 7-7/8" @ 5532. Ran 131jts 5-1/2 J55 17# @ 5518. Cmt w/500sx C. lead, 400sx C. tail. PD @ 2:15pm. Circ 131sx WOC 24hrs. RR. Will test csg to 3500# for 30 min on comp. 9/22/2010 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 |
|----------|--------|------------|-----------|----------|--------------|-------|---------|----------|-------|-------|-------|---------|-----------|-----------|-----------|
| 09/22/10 | Surf   |            | 17.5      | 13.375   | 48           | H40   | 0       | 362      | 400   |       | C     |         |           |           | Y         |
| 09/23/10 | Int1   |            | 11        | 8.625    | 24           | J55   | 0       | 858      | 500   |       | C     |         |           |           | Y         |
| 09/29/10 | Prod   |            | 7.875     | 5.5      | 17           | J55   | 0       | 5518     | 900   |       | 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 10/6/2010  
 Type or print name Diane Kuykendall E-mail address dkuykendall@conchoresources.com Telephone No. 432-683-7443

For State Use Only:  
 APPROVED BY: Randy Dade TITLE District Supervisor DATE 10/12/2010 1:28:01 PM