District I Form C-103 State of New Mexico 1625 N. French Dr., Hobbs, NM 88240 August 1, 2011 Phone:(575) 393-6161 Fax:(575) 393-0720 Energy, Minerals and Natural District II Permit 154244 811 S. First St., Artesia, NM 88210 Resources WELL API NUMBER Phone:(575) 748-1283 Fax:(575) 748-9720 District III 30-015-40058 Oil Conservation Division 1000 Rio Brazos Rd., Aztec, NM 87410 Indicate Type of Lease Phone:(505) 334-6178 Fax:(505) 334-6170 1220 S. St Francis Dr. District IV S 1220 S. St Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462 State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS PINTO 36 STATE COM (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 8. Well Number PROPOSALS.) 004H Type of Well: O 9. OGRID Number 2. Name of Operator COG OPERATING LLC 229137 3. Address of Operator 10. Pool name or Wildcat ONE CONCHO CENTER, 600 W. ILLINOIS AVENUE, MIDLAND, TX 79701 4. Well Location Unit Letter P 150 S 1040 feet from the line and feet from the 1ine 36 Township NMPM 188 25E Section Range Eddy County 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3456 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__ mil Below-Grade Tank: Volume_ bbls; Construction Material_ Pit Liner Thickness: Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK ☐ ALTER CASING TEMPORARILY ABANDON

CHANGE OF PLANS COMMENCE DRILLING OPNS.
PLUG AND ABANDON PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMENT JOB Other: Other: Spud X 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. 8/3/2012 Spudded well. 8/3/12 Spud 12-1/4" hole @ 12AM. 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 Production Reporting Mgr DATE 8/29/2012

TITLE District Supervisor

Type or print name Diane Kuykendall

Randy Dade

For State Use Only: APPROVED BY: E-mail address dkuykendall@conchoresources.com Telephone No. $_{7443}^{-1}$

432-683-

DATE 8/29/2012