

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 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
August 1, 2011
Permit 158874

<p align="center">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.)</p>		<p>WELL API NUMBER 30-015-39152</p>
<p>1. Type of Well: O</p>		<p>5. Indicate Type of Lease S</p>
<p>2. Name of Operator COG OPERATING LLC</p>		<p>6. State Oil & Gas Lease No.</p>
<p>3. Address of Operator One Concho Center, 600 W. Illinois Ave, Midland, TX 79701</p>		<p>7. Lease Name or Unit Agreement Name GRAVE DIGGER STATE COM</p>
<p>4. Well Location Unit Letter <u>1</u> : <u>330</u> feet from the <u>N</u> line and <u>380</u> feet from the <u>E</u> line Section <u>2</u> Township <u>20S</u> Range <u>25E</u> NMPM <u>Eddy</u> County</p>		<p>8. Well Number 004H</p>
<p>11. Elevation (Show whether DR, KB, BT, GR, etc.) 3438 GR</p>		<p>9. OGRID Number 229137</p>
<p>Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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 _____</p>		<p>10. Pool name or Wildcat</p>

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>Other: _____</p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>Other: Drilling/Cement <input checked="" type="checkbox"/></p>
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
11/17/12 Spud 11 @ 5AM. 11/18/12 TD 11 @ 1110. Ran 25jts 8-5/8 J55 32# @ 1110. Cmt w/1050sx C. PD @ 9:02PM. Circ 488sx to surf. WOC 18hrs. Test csg to 2000# for 30 min,ok.
11/19/12 Drill 7-7/8 hole 1110-2229. KOP 2336.
11/27/12 TD 7-7/8 @ 7207MD 2869TVD.
11/28/12 Ran 164jts 5-1/2 17# L80 @ 7200. Cmt 400sx C. lead, 150sx C. tail, 450sx H. PD @ 5:43PM. Circ 296sx to surface.
11/29/12 RR.11/17/2012 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
11/18/12	Surf		11	8.625	32	J55	0	1110	1050		C				Y
11/27/12	Prod		7.875	5.5	17	L80	0	7200	1000		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 Production Reporting Mgr DATE 12/4/2012

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 12/4/2012 3:49:09 PM