District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(375) 393-6161 Fax:(375) 393-0720 District II 811 S. First St., Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural

Form C-103 August 1, 2011

Permit 158616

Phone:(575) 748-1283 Fax:(575) 748-9720	Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505		WE	WELL API NUMBER 30-025-40714 5. Indicate Type of Lease S 6. State Oil & Gas Lease No.	
District III					
1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170			- 3		
<u>District IV</u> 1220 S. St Francis Dr., Santa Fe, NM 87505					
Phone:(505) 476-3470 Fax:(505) 476-3462			6. 9		
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PL			C2V200000000000000000000000000000000000	CORAZON STATE UNIT	
A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" PROPOSALS.)		(FORM C-101) FOR SU	8. V	Well Number	
1. Type of Well:O			0	01H	
2. Name of Operator				9. OGRID Number	
COG OPERATING LLC				229137	
3. Address of Operator		11551 11 - 5 - 5	10.	Pool name or V	Wildcat
One Concho Center, 600 W.	. Illinois Ave, Midland	, TX 79701			
4. Well Location		222		_	
Unit Letter P : 100 feet from				E tine	
Section 3 Township	21S I	Range 33E	NMPM	Lea	County
12. Check Approp NOTICE OF INTENTIC PERFORM REMEDIAL WORK □ PLUC TEMPORARILY ABANDON □ CHAN	ON TO:	e Nature of Notice,	SEQUENT I	Other Data REPORT C	
Other:		Other: Spud			\bowtie
Describe proposed or completed operations. (Clework.) SEE RULE 1103. For Multiple Completion 11/15/2012 Spudded well. I hereby certify that the information above is true an been/will be constructed or closed according to NMs SIGNATURE Electronically Signed	s: Åttach wellbore diagram d complete to the best of m OCD guidelines TITLE P.	of proposed completion or r y knowledge and belief. I fin al permit or an (attached roduction Reporting Mg	ecompletion. ther certify that alternative OC:	any pit or belov D-approved plan DATE 11/2	x-grade tank has n □. 8/2012
Type or print name Diane Kuykendall	E-mail address	S dkuykendall@conchor	esources.com	Telephone	No. ₇₄₄₃
For State Use Only: APPROVED BY: ELIDIO GONZALI	ES TITLE HO	OBBS STAFF MANA	GER D	ATE 12/4/20	012