District I

State of New Mexico

Form C-103

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	Energy, Mine Res Oil Conserv 1220 S. St	rals and Natural ources ration Division Francis Dr.	August 1, 2011 Permit 159051 WELL API NUMBER 30-015-40481 5. Indicate Type of Lease S
Phone:(505) 476-3470 Fax:(505) 476-3462	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
SUNDRY NOTIO (DO NOT USE THIS FORM FOR PROPO A DIFFRENT RESERVIOR. USE "APPL PROPOSALS.)		DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement Name CLUSTER STATE COM 8. Well Number
1. Type of Weii:O			004H
Name of Operator COG (OPERATING LLC		9. OGRID Number 229137
Address of Operator One Concho Center, 600	W. Illinois Ave, Midland,	TX 79701	10. Pool name or Wildcat
4. Well Location		. 100	W
Unit Letter L : 1887 feet f Section 16 Township	tom the S line ar	ad 190 feet from the tange 27E NMPN	W line I Eddy County
		other DR, KB, BT, GR, etc.)	
Pit or Below-grade Tank Application or Clo	7.73	- OIC	
Pit Type Depth to Groundwater	Distance from nearest fi	resh water well bils; Construction	4.5
 Check Appr NOTICE OF INTENT 	•	e Nature of Notice, Repor	t or Other Data ENT REPORT OF:
	UG AND ABANDON	REMEDIAL WORK	☐ ALTER CASING ☐
TEMPORARILY ABANDON CH	IANGE OF PLANS	COMMENCE DRILLING OP	NS. PLUG AND ABANDON
PULL OR ALTER CASING M	ULTIPLE COMPL	CASING/CEMENT JOB	

11/21/2012 Spudded well.

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 \square , a general permit \square or an (attached) alternative OCD-approved plan \square . SIGNATURE Electronically Signed TITLE Production Reporting Mgr DATE 12/7/2012TITLE Production Reporting Mgr E-mail address dkuykendall@conchoresources.com Telephone No. 7443 Type or print name Diane Kuykendall For State Use Only:
APPROVED BY: Randy Dade TITLE District Supervisor DATE 12/10/2012