

Submit 1 Copy To Appropriate District Office

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

District II - (575) 748-1283
811 S. First St., Artesia, NM 88210

District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410

District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-42445
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LYCHEE BWS STATE COM
8. Well Number 1H
9. OGRID Number 229137
10. Pool name or Wildcat Berry; Bone Spring, South
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
COG OPERATING LLC

3. Address of Operator
2208 W Main St. Artesia, NM 88210

4. Well Location
Unit Letter O : 200 _____ feet from the SOUTH _____ line and 1980 _____ feet from the EAST _____ line
Section 22 Township 21S Range 34E NMPM County LEA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			OTHER: <input checked="" type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>			STATE OF NM COMMISSIONER OF PUBLIC LANDS
OTHER: <input type="checkbox"/>			SURFACE COMMINGLE APPROVAL

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

STATE OF NEW MEXICO COMMISSIONER OF PUBLIC LANDS SURFACE COMMINGLE APPROVAL

Lychee BSW State Com 1H 30-025-42445
Lychee State Com 503H 30-025-46423

SIGNATURE Jeanette Barron TITLE Regulatory Technician II DATE 09.21.20

Type or print name
Jeanette Barron E-mail address: jbarron@concho.com PHONE: 575-748-6974

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____