

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

EMNRD-OCD ARTESIA Form C-103
REC'D: 7/13/2020 Revised July 18, 2013

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

WELL API NO. 30-015-35105
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Judkins Fee
8. Well Number #1
9. OGRID Number 229137
10. Pool name or Wildcat Carlsbad; Morrow, South (Pro Gas)

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator COG Operating, LLC	
3. Address of Operator 2208 W Main Street Artesia, NM 88210	
4. Well Location Unit Letter A : 800 feet from the N line and 800 feet from the E line Section 13 Township 24S Range 25E NMPM County Eddy	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3732' GR	

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 checked="" 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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

- Set 4 1/2" CIBP @ 11,460'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx class H cmt @ 11,460-11,360'.
- Perf & Sqz 50 sx cmt @ 8745-8644'. WOC & Tag (7" Shoe)
- Perf & Sqz 50 sx cmt @ 5800-5650'. WOC & Tag (7" DV Tool)
- Perf & Sqz 50 sx cmt @ 2140-1990'. WOC & Tag (9 5/8" Shoe)
- Perf & Sqz 50 sx cmt @ 712-560'. WOC & Tag (9 5/8" DV Tool)
- Perf & Sqz 50 sx cmt @ 255' to surface.
- Cut off well head, verify cmt to surface, weld on Dry Hole Marker.

INCOMPLETE WELL FILES

Spud Date:

Rig Release Date:

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

SIGNATURE Delilah Flores TITLE: Regulatory Technician

DATE: 7/13/2020

Type or print name: Delilah Flores

E-mail address: dflores2@concho.com

PHONE: 575-748-6946

For State Use Only

APPROVED BY: _____ DATE gc 7/17/2020

Conditions of Approval (if any):

DENIED