

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

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

Form C-103
Revised August 1, 2011

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)		WELL API NO. 30-015-38501
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator COG Production LLC		6. State Oil & Gas Lease No.
3. Address of Operator 2208 W. Main Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Sidewinder
4. Well Location Unit Letter <u>D</u> : <u>480</u> feet from the <u>North</u> line and <u>480</u> feet from the <u>West</u> line Section <u>32</u> Township <u>26S</u> Range <u>29E</u> NMPM <u>Eddy</u> County		8. Well Number 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2994' GR		9. OGRID Number 217955
		10. Pool name or Wildcat WC; Bone Spring 99876

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Completion Operations <input checked="" type="checkbox"/>	

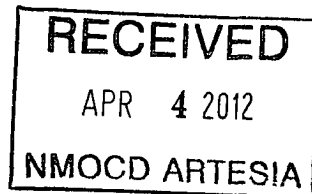
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/3/12 to 2/10/12 MIRU. Log from 7100' to surface. TOC @ 1550'. Perforate Bone Spring 7055-11173' (598). Acdz w/41895 gal 7 1/2%. Frac w/3854764# sand & 2982985 gal fluid.

2/21/12 Began flowing back & testing.

3/4/12 to 3/10/12 Drill out all frac plugs. Circulate clean.

3/13/12 Set 2 7/8" J-55 tbg & pkr @ 6617'.



Spud Date: 11/6/11

Rig Release Date: 11/26/11

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

SIGNATURE Stormi Davis TITLE: Regulatory Analyst DATE: 4/2/12
Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

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APPROVED BY: T.C. Shepard TITLE Geologist DATE 4/4/2012
Conditions of Approval (if any):