

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr., Hobbs, NM 88240  
District II  
1301 W Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S St Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 19, 2008

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

WELL API NO. 30-015- <u>32991</u>
5. Indicate Type of Lease <u>Federal</u> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. Federal Lease # NMLC028784B
7. Lease Name or Unit Agreement Name <u>Burch Keely Unit</u>
8. Well Number <u>361</u>
9. OGRID Number <u>229137</u>
10. Pool name or Wildcat Grayburg Jackson;SR-Q-G-SA 28509

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  
550 W. Texas Ave., Suite 100 Midland, TX 79701

4. Well Location  
Unit Letter A : 965 feet from the North line and 330 feet from the East line  
Section 19 Township 17S Range 30 E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3633 GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

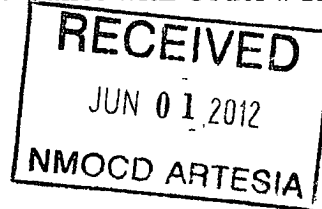
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☒ Pool Change

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**COG Operating LLC respectfully request to have this well's pool changed from the Grayburg Jackson;SR-Q-G-SA (28509) to the Burch Keely-Glorieta-Upper Yeso (97918) in accordance with Order # R-10067-E.**



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 K. C. TITLE Lead Regulatory Analyst DATE 4/23/12

Type or print name Kanicia Castillo E-mail address: kcastillo@concho.com PHONE: 432-685-4332  
**For State Use Only**

APPROVED BY: [Signature] TITLE SUPERVISOR, DISTRICT II DATE 6/05/2012  
Conditions of Approval (if any):