Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.
1625 N. French Dr , Hobbs, NM 88240 District II	OIL CONSEDUATION D	MAISION	30-015-338/0
1301 W Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease Federal
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			STATE FEE 6. State Oil & Gas Lease No.
1220 S St. Francis Dr , Santa Fe, NM			Federal Lease # NMLC028784B
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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)		SUCH	Burch Keely Unit
1. Type of Well: Oil Well Gas Well Other			8. Well Number 396
2. Name of Operator			9. OGRID Number
COG Operating LLC			229137
3. Address of Operator 550 W. Texas Ave., Suite 100 Midland, TX 79701			10. Pool name or Wildcat Grayburg Jackson; SR-Q-G-SA 28509
4. Well Location		Glayburg Jackson, Six Q G 5/1 20507	
Unit Letter H: 1656 feet from the North line and 330 feet from the East line			
Section 18 Township 17S Range 3D E NMPM Eddy County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3649 GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBS			SEQUENT REPORT OF: (ALTERING CASING [
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI			
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐			JOB 🖺
DOWNHOLE COMMINGLE			
OTHER: 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.			
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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.			
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Smud Data	Rig Release Date		
Spud Date:	Kig Kelease Date	۶:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE 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			
JUN 08 2012			
APPROVED BY: / CAPPROVED BY: DATE			
Conditions of Approval (if any):			