Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Res	June 19, 2008
1625 N French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-015- <i>35</i> 44/
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVIS	5 Indicate Type of Lease Federa
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr	STATE FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM 87505		Federal Lease # NMLC028784B
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI	ICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS) 1. Type of Well: Oil Well	Gas Well Other	8. Well Number 403
2. Name of Operator	perating LLC	9. OGRID Number 229137
3. Address of Operator	Arating BBC	10. Pool name or Wildcat
550 W. Texas Av	ve., Suite 100 Midland, TX 79701	Grayburg Jackson;SR-Q-G-SA 28509
4. Well Location	feet from the North line and 2130	feet from the WeSt line
Section \ 9		JMPM Eddy County
Section ()	11. Elevation (Show whether DR, RKB, F	
	3629 GR	
12 Choole	Appropriate Box to Indicate Nature of	of Nation Papart or Other Data
12. Check	Appropriate Box to indicate Nature C	of Notice, Report of Other Data
	NTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	· · · · · · · · · · · · · · · · · · ·	DIAL WORK ALTERING CASING
TEMPORARILY ABANDON DULL OR ALTER CASING		MENCE DRILLING OPNS.☐ P AND A ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
DOWNHOLE COMMINGLE		TO CEIMENT JOB
OTHER:	☐ OTHE	R: Pool Change
		t details, and give pertinent dates, including estimated date
	ork). SEE RULE 1103. For Multiple Comp	pletions: Attach wellbore diagram of proposed completion
or recompletion.		
COG Operating LLC respe	ectfully request to have this well's	pool changed from the Grayburg Jackson;SR-
		7918) in accordance with Order # R-10067-E.
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		INMOCD ARTESIA
c. dD	Pi, Palan Da	
Spud Date:		
	Rig Release Date:	
	Rig Release Date:	
I hereby certify that the information	n above is true and complete to the best of m	ny knowledge and belief.
I hereby certify that the information SIGNATURE	n above is true and complete to the best of m	
SIGNATURE C	n above is true and complete to the best of m TITLE Lead Res	gulatory Analyst DATE 4/23/12
V . C	n above is true and complete to the best of m TITLE Lead Res	
SIGNATURE Kanieta C	n above is true and complete to the best of m TITLE Lead Res	gulatory Analyst DATE 4/23/12