| Submit 3 Copies To Appropriate District Office District I | State of New Mexico Energy, Minerals and Natural Resources | | Form C-103 June 19, 2008 WELL API NO. |
|--|---|--------------------|---|
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W Grand Ave., Artesia, NM 88210 District III | OIL CONSERVATION 1220 South St. Fran | | 30-015- 33 797 5. Indicate Type of Lease Federal |
| 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87 | | STATE FEE 6. State Oil & Gas Lease No. Federal Lease # NMLC028784B |
| (DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC | | UG BACK TO A | 7. Lease Name or Unit Agreement Name Burch Keely Unit |
| PROPOSALS.) 1. Type of Well: Oil Well | Gas Well Other | | 8. Well Number 386 |
| 2. Name of Operator COG Operating LLC | | | 9. OGRID Number 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 Unit Letter G:2010 feet from the North line and 1980 feet from the East line Section 13 Township 17S Range 29 E NMPM Eddy County | | | |
| Section 13 Township 17S Range 29 E NMPM 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3637 GR | | | Eddy County) |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. PAND A DOWNHOLE COMMINGLE COMPL CASING/CEMENT JOB | | | |
| | | | Pool Change |
| 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. RECEIVED JUN 0 1 2012 | | | |
| | | | NMOCD ARTESIA |
| Spud Date: | Rig Release Da | ate: | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | |
| SIGNATURE - S | TITLE L | ead Regulatory Ana | alyst DATE <u>4/23/12</u> |
| 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: Conditions of Approved (if any): | HMN TITLE 02 | ougis! | DATE |