

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

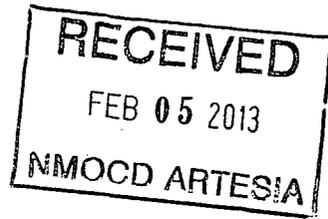
Form C-103
 Revised August 1, 2011

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

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-39842
2. Name of Operator COG Operating, LLC		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator One Concho Center 600 W. Illinois Ave. Midland, TX 79701		6. State Oil & Gas Lease No.
4. Well Location Unit Letter E : 2310 feet from the North line and 235 feet from the West line Section 5 Township 19S Range 26E NMPM Eddy County		7. Lease Name or Unit Agreement Name Patton 5 Fee
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3368'		8. Well Number 4H
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		9. OGRID Number 229137
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"/>		10. Pool name or Wildcat Penasco Draw; San Andres-Yeso 50270
OTHER: <input type="checkbox"/>		11. Pool name or Wildcat Penasco Draw; San Andres-Yeso 50270
OTHER: <input type="checkbox"/>		12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data 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 <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.

11/5/12 Test lines to 7000psi. Perf @ 1836 - 1845, 4 SPF, 40 holes. Acidize w/2,293 gals 15% HCL. Frac w/36,096 gals gel, 45,267# 16/30 brown sand, 15,228# 16/30 SiberProp.
 11/12/12 Clean out to PBDT 2046.
 11/13/12 RIH w/59jts 2-7/8" J55 6.5# tbg, EOT @ 1955.
 11/14/12 RIH w/2-1/2x1-1/2x20' RHBC pump. Hang well on.



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 W Jackson TITLE Regulatory Analyst DATE 1/30/13

Type or print name Chasity Jackson E-mail address: cjackson@concho.com PHONE: 432-686-3087
 For State Use Only

APPROVED BY: RR Dado TITLE Dist. Supervisor DATE 2/5/13

Conditions of Approval (if any):

gmw