

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

**** Amended **** Form C-103
 Revised August 1, 2011

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

WELL API NO. 30-015-40570
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name White Oak State
8. Well Number 27
9. OGRID Number 229137
10. Pool name or Wildcat Empire; Glorieta-Yeso, 96210

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
One Concho Center
600 West Illinois Ave., Midland, TX 79701

4. Well Location
Unit Letter H : 2270 feet from the North line and 185 feet from the East line
 Section 23 Township 17S Range 28E NMPM Eddy County

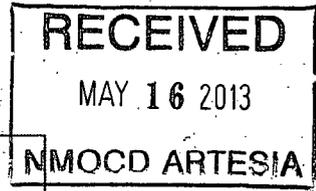
11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3704' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <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.

11/15/12 Test casing to 3500psi for 30 mins. Ok.
 11/16/12 Perf Lower Blinebry @ 4710 - 4960 w/1 SPF, 26 holes.
 11/20/12 Acidize w/3,250 gals 15% acid. Frac w/118,077 gals gel, 151,575# 16/30 brown sand, 28,505# 16/30 CRC. Set CBP @ 4685. Perf Middle Blinebry @ 4450 - 4650 w/1 SPF, 26 holes. Acidize w/3,250 gals 15% acid. Frac w/113,355 gals gel, 142,400# 16/30 brown sand, 25,407# 16/30 CRC. Set GBP @ 4420. Perf Upper Blinebry @ 4190 - 4390 w/1 SPF, 26 holes. Acidize w/3,250 gals 15% acid. Frac w/115,393 gals gel, 144,017# 16/30 brown sand, 29,926# 16/30 CRC. Set CBP @ 4000. Perf Paddock @ 3720 - 3970 w/1 SPF, 26 holes. Acidize w/2,000 gals 15% acid. Frac w/98,368 gals gel, 97,634# 16/30 brown sand, 23,941# 16/30 CRC.
 11/28/12 Drill out plugs. Clean out to PBD 5364.
 11/29/12 RIH w/151jts 2-7/8" J55 6.5# tbg, EOT @ 5171.
 11/30/12 RIH w/2-1/2"x2"x24' pump. Hang on well.



Spud Date: 10/30/12 Rig Release Date: 11/6/12

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Chasity Jackson TITLE Regulatory Analyst DATE 5/16/13

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

For State Use Only
 APPROVED BY: [Signature] TITLE DIST # Supervisor DATE 5/16/2013
 Conditions of Approval (if any):

[Handwritten initials]