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Submit 1 Copy To Appropriate Distric	Copy To Appropriate District State of New Mexico				For	m C-103	
Office <u>District I</u> – (575) 393-6161	<u>1 – (575) 393-6161</u> Energy, Minerals and Natural Resources			Revised August 1, 2011			
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		· · · · · ·			WELL API NO.		
$\frac{District II}{811 \text{ S. First St., Artesia, NM 88210}}$		OIL CONSERVATION DIVISION			30-015-41025 5. Indicate Type of Lease		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 8741	0	1220 South St. Francis Dr.				⊠	
District IV - (505) 476-3460	0	Santa Fe, NM 87505			& Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 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.)				Illustrated Man Fee Com			
1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other				8. Well Number 1H			
2. Name of Operator					9. OGRID Number		
COG Operating LLC 3. Address of Operator				229137           10. Pool name or Wildcat			
2208 W. Main Street, Artesia, NM 88210				San Lorenzo; Bone Spring, North			
4. Well Location							
Unit Letter D		et from the <u>North</u>			om the West	_ line	
Section 12	Township		ange 28E	NMP	M Eddy	County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2940' GR							
				. 83	and a subscription of the second s	en e	
12. Chec	k Appropriate B	ox to Indicate Nat	ture of Notice,	Report or Oth	ner Data	• •	
	INTENTION T	- <u>O</u> ·	SUF		REPORT OF:		
PERFORM REMEDIAL WORK		-	REMEDIAL WOR			SING 🗖	
TEMPORARILY ABANDON	CHANGE PL	ANS 🗍	COMMENCE DR	ILLING OPNS.	P AND A		
PULL OR ALTER CASING	MULTIPLE C	OMPL	CASING/CEMEN	IT JOŖ [			
DOWNHOLE COMMINGLE							
OTHER:		· n	OTHER: Withdr	awal of Gas Con	nect C-103 & C-104		
13. Describe proposed or co	ompleted operations						
of starting any proposed		E 19.15.7.14 NMAC.	For Multiple Co	mpletions: Atta	ch wellbore diagram	1 of	
proposed completion or	recompletion.						
				•			
			•		ECEIVED		
Please withdraw the C-103 & C-	104 submitted 7/2/	13. This well has not	been connected to	o sales.			
					AUG <b>2 0</b> 2013		
				រុំសុខ	MOCD ARTES	IA	
······							
Spud Date: 2/19	9/13	Rig Release Date	a.	3/6/13			
		nig norouse Bud					
			* .				
I hereby certify that the informat	ion above is true an	d complete to the bes	t of my knowledg	e and belief			
			t of my knowledg	,e und benen.			
SIGNATURE	Dams	TITLE: <u>Re</u>	gulatory Analyst		DATE: <u>8/13/1</u>	<u>3 :</u>	
Type or print name: <u>Stormi</u>	Davis	E-mail address:	sdavis@conch	o.com	_ PHONE: (575)	748-6946	
For State Use Only RO	) od .	Λ					
APPROVED BY:	KUL	TITLE Des-	7 Sepens	sol i	DATE 8/20/13		
Conditions of Approval (if any):			/				