

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

WELL API NO. 30-015-40717
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Lakewood SWD
8. Well Number 1
9. OGRID Number 229137
10. Pool name or Wildcat SWD;Cisco 96099
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3353 GR

**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 SWD

2. Name of Operator  
COG Operating LLC

3. Address of Operator  
One Concho Center, 600 W Illinois Avenue, Midland, TX 79701

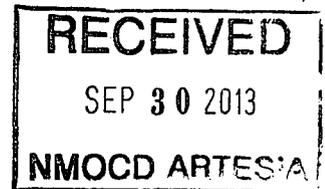
4. Well Location  
 Unit Letter B : 1220 feet from the North line and 2490 feet from the East line  
 Section 8 Township 19S Range 26E NMPM County: Eddy

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

<b>NOTICE OF INTENTION TO:</b> 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"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> 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: <u>Completion</u> <input checked="" type="checkbox"/>
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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.

11/01/12 Test DV tool @ 6869 to 1000#, ok. Drill out DV tool.  
 11/05/12 Drill cmt from 8350 - 8386. Circ clean.  
 11/07/12 Test csg to 1000# for 30min, ok.  
 11/08/12 Perf Lower Canyon @ 8084 - 7891 w/4 SPF, 256 holes.  
 11/09/12 Acidize w/ 5,250 gals. 15% NEFE HCL acid.  
 11/13/12 Re- Perf Lower Canyon @ 8084 - 7891 w/4 SPF, 256 holes. Acidize w/14,700 gals 2% KCL acid. Set RBP @ 7877.  
 11/14/12 Perf Upper Canyon @ 7840-7870 w/4 SPF, 72 holes.  
 11/15/12 Acidize w/3,000 gals 15% HCL acid.  
 11/16/12 Set Packer @ 7765. Test packer to 500#, good.  
 11/19/12 Acidize upper and lower perms w/45,000 gals 15% HCL acid.  
 11/20/12 RIH w/ 128jts 3-1/2, L80, 9.3# tbg, set @ 7780.  
 11/21/12 Set packer @ 7765. Test backside to 700# for 30min, ok.  
 11/26/12 Performed MIT. Pressure up backside to 320# for 30mins, ok. Richard Inge witnessed.



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

SIGNATURE [Signature] TITLE Lead Regulatory Analyst DATE 2/05/13

Type or print name Kanicia Castillo E-mail address: kcastillo@concho.com PHONE: 432-685-4332

For State Use Only  
 APPROVED BY: [Signature] TITLE Dist. Reg. Rep. SWD DATE 9/30/13  
 Conditions of Approval (if any):