Submit 1 Copy To Appropriate District Office District I – (575) 393-6161  State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised August 1, 2011
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	WELL API NO.  30-015-39999  5. Indicate Type of Lease  STATE FEE  6. State Oil & Gas Lease No.
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	7. Lease Name or Unit Agreement Name  SRO STATE UNIT  8. Well Number #018H  9. OGRID Number
COG Operating LLC	229137
3. Address of Operator 600 W Illinois Ave., Midland, TX 79701	10. Pool name or Wildcat  Hay Hollow; Bone Spring
4. Well Location  Unit Letter A: 330 feet from the North line and 330 feet from the East line  Section 17 Township 26S Range 28E NMPM Eddy County  11. Elevation (Show whether DR, RKB, RT, GR, etc.)  3061' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  PLUG AND ABANDON  CHANGE PLANS  COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB  CASING/CEMENT JOB	
OTHER: Name Change 🗵 OTHER:	
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.	
COG Operating LLC respectfully requests that this well name be changed as follows:	
From: SRO STATE UNIT #018H	
To: SRO STATE COM #018H (40112)	RECENTER
The SRO State Unit will terminate March 1, 2014. We request that these name changes be effective March 1, 2014.  MMOCD ARTESIA	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
A A	
SIGNATURE / May Title Regulatory Analyst	DATE <u>02/26/2014</u>
Type or print name Melanie J. Parker E-mail address: mparker@concho.com PHONE: 575-748-6940  For State Use Only    Geologict	
APPROVED BY: Conditions of Approval (if any): O TO A COOT	
Conditions of Approval (if any): Provide C10Z	