

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico DISTRICT
 Energy, Minerals and Natural Resources
NM OIL CONSERVATION
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 June 19, 2008

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection		WELL API NO. 30-015-20408 5. Indicate Type of Lease Federal STATE <input type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No. NMLC028731A
2. Name of Operator COG Operating LLC		7. Lease Name or Unit Agreement Name M Dodd A 8. Well Number 47
3. Address of Operator 600 W. Illinois Ave., Midland, TX 79701		9. OGRID Number 229137 10. Pool name or Wildcat SWD; Upper Penn
4. Well Location Unit Letter <u>J</u> : <u>1980</u> feet from the <u>South</u> line and <u>1880</u> feet from the <u>East</u> line Section <u>22</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3551' GR		

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

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"/>	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: Repair tbg <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 9/8/15 MIRU.
- 9/9/15 Release packer, packer stuck.
- 9/10/15- 9/14/15 Trying to recover packer.
- 9/15/15 Recovered packer.
- 9/16/15 TIH w/ bit and csg scrapper. TIH w/ RBP and Packer. Set RBP @ 8918', set packer @ 8884'. Test RBP to 1500 psi for 5 mins, load csg and pressure to 590 psi for 10mins. Release packer and retrieve RBP.
- 9/18/15 Test tbg, found 6 bad jts.
- 9/21/15 TIH w/ AS-1 PKR, w/ 1.87 profile, 264jts 2-7/8 IPC tbg, set PKR @ 8937'. Test csg and packer to 500 psi for 20 mins, held.
- 9/22/15 Latched onto packer, test csg to 600 psi for 30 mins, good test.
- 9/23/15 Set blanking plug in profile on packer, release on/off tool. PU 28' of 2-7/8 L-80 tbg subs, 1 jts 2-7/8 IPC tbg, circ 150bbbs packer fluid down csg. Packer @ 8932'. ND BOP, flange well up. Test packer, RD. Fish Blanking plug. Contact BLM/OCD for MIT test.
- 9/24/15 MIRU pump truck, pressure csg to 500 psi on chart recorder for 30mins, good test. BLM rep on location. Chart attached.

SUBJECT TO LIKE APPROVAL BY BLM

Spud Date:

Rig Release Date:

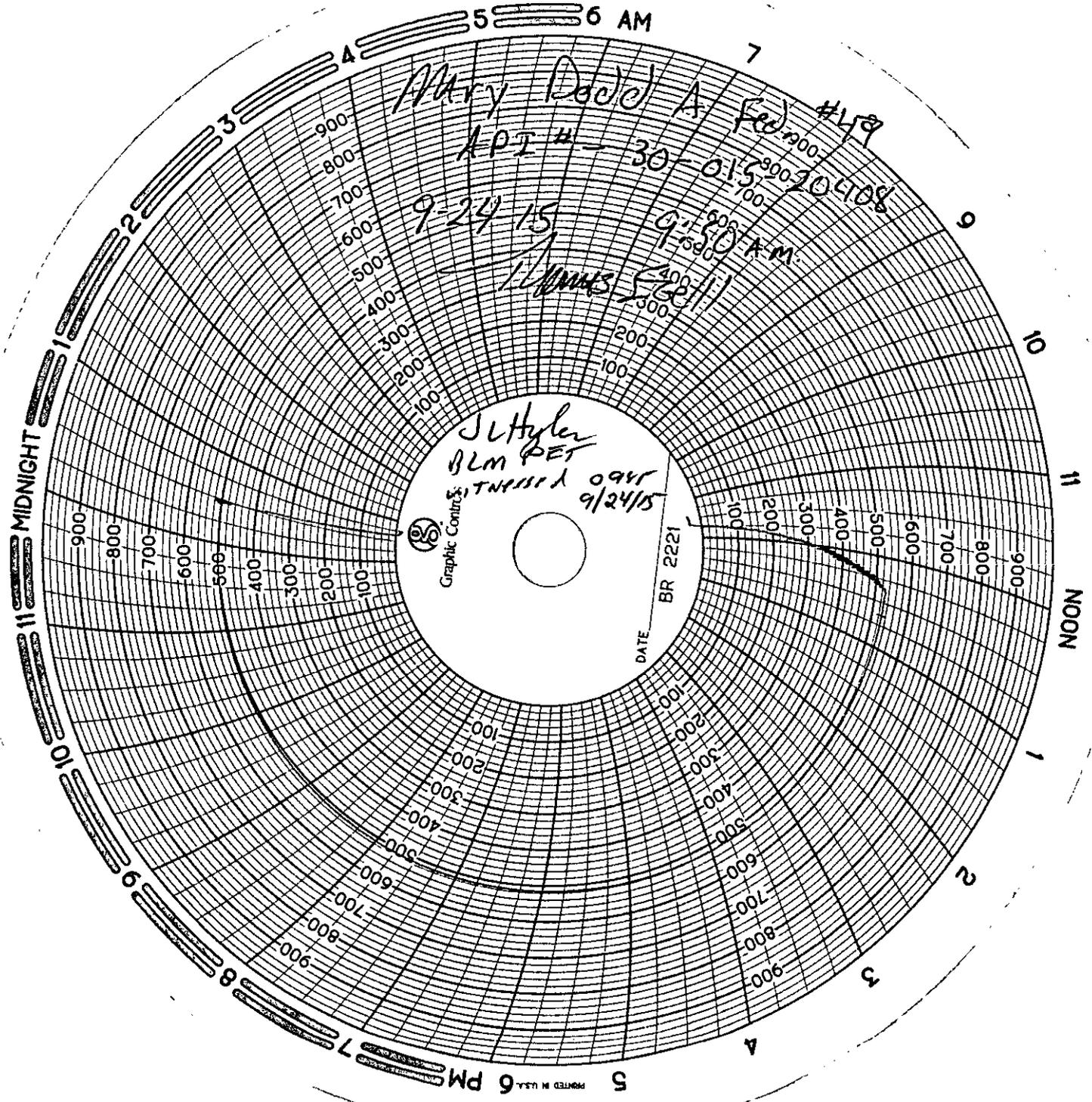
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE  TITLE Lead Regulatory Analyst DATE 09/28/15

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

For State Use Only

APPROVED BY: **SUBJECT TO LIKE APPROVAL BY BLM**  TITLE _____ DATE 10/1/2015
 Conditions of Approval (if any):



Graphic Controls

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