Submit 1 Copy To Appropriate District ONSERVATION Office District I – (575) 393-616 NM OIL Energy, Minerals and Natural Resources 1625 N French Dr. Hobbs NM 88240 – 0.9 7016	
Submit 1 Copy To Appropriate District ONSERVATION State of New Mexico Office District I - (575) 393-616 NM OIL ARTESTA DISTRICT Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 FEB 0 8 OIL CONSERVATION DIVISION	Form C-103
District 1 – (575) 393-616 ARTESTA (775) Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 2005	Revised August 1, 2011 WELL API NO.
District II - (575) 748-1283 FEB OH CONSERVATION DIVISION	30-015-24358
811 S. First St., Artesia, NM 88210 District III ~ (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 RECEIVED 1220 South St. Francis Dr. District IV ~ (505) 476-3460 Santa Fe, NM 87505	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 RECEIVED 1220 South St. Trainers St.	STATE FEE 6. State Oil & Gas Lease No.
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	o. State Off & Gas Lease No.
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.)	Aminoil State
1. Type of Well: Oil Well Gas Well Other SWD	8. Well Number
Name of Operator COG Production LLC	9. OGRID Number 217955
3. Address of Operator	10. Pool name or Wildcat
2208 W. Main Street, Artesia, NM 88210	SWD; Delaware
4. Well Location	
	1980 feet from the West line
Section 22 Township 26S Range 28E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Eddy County
11. Elevation (Show whether DR, RRB, RT, GR, etc.) 2967' GR	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB OTHER: OT	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE: Regulatory Analyst	DATE: 2/1/16
Type or print name: Stormi Davis E-mail address: sdavis@conche	
For State Use Only	
APPROVED BY: TITLE STANDING DATE 2/9/16 Conditions of Approval (if any):	