Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office District 1	Energy, Minerals and Natural Resources		October 13, 2009
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-41907 5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santo 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			Myox 5 State
PROPOSALS.)			8. Well Number
1. Type of Well: Oil Well			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			Delaware River; Bone Spring
4. Well Location			
Unit Letter A: 190 feet from the North line and 420 feet from the East line			
Section 5	Township 26S Range		NMPM Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3006' GR			
12 Chack Appropriate Box to Indicate Nature of Natice Penert or Other Data			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			<u> </u>
TEMPORARILY ABANDON	CHANGE PLANS	LLING OPNS. P AND A	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMENT	I JOB
OTHER: APD Extension		OTHER:	
⊠ A D Extension			
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 approval for a 1 year extension on the above referenced APD.			
NM OIL CONSERVATION			
	•		ARTESIA DISTRICT
			JUL 2 8 2016
Spud Date:	Rig Release Da		
Spud Date:	Kig Kelease Da	ie:	RECEIVED
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE / Y OF Regulatory Analyst DATE: 7/28/2016			
o z			
Type or print name: Mayte Reves E-mail address: mreyes@conchoresources.com PHONE: (575) 748-6945			
For State Use Only			
APPROVED BY: Stren 8 houp TITLE DUNDSplc-adu DATE 7-28-16			
Conditions of Approval (if any)			
Future extension requests must			
be accompanied by Form C-102			