

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
NM OIL CONSERVATION
ARTESIA DISTRICT
APR 19 2017
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
RECEIVED Santa Fe, NM 87505

Form C-103
October 13, 2009

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.)		WELL API NO. 30-015-27619
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator COG Operating LLC		6. State Oil & Gas Lease No. 647
3. Address of Operator 600 W. Illinois, Midland, TX 79701		7. Lease Name or Unit Agreement Name Arco 26 A State
4. Well Location Unit Letter K : 1650 feet from the S line and 1650 feet from the W line Section 26 Township 17S Range 28E NMPM County Eddy		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3655' GR		9. OGRID Number 229137
		10. Pool name or Wildcat Artesia, Q-G-SA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

04/05/17 MIRU plugging equipment. POH w. rods & pump. ND well head, NU BOP. POH w/ 87 jts of 2 7/8 tbg. Set 5 1/2 CIBP @ 1900'. Circulated hole w/ MLF. Spotted 25 sx class C cmt @ 1900-1800'. WOC. 04/06/17 Tagged plug @ 1679'. Spotted 25 sx class C cmt w/ 2% CACL @ 1350-1150'. WOC. Tagged plug @ 1161'. Spotted 25 sx class C cmt w/ 2% CACL @ 850-608'. WOC. Tagged plug @ 640'. Perf'd csg @ 596'. Pressured up on perfs. 04/07/17 Spotted 70 sx class C cmt @ 640 & circulated to surface. Rigged down and moved off. 04/11/17 Moved in backhoe and welder. Dug out cellar. Cut off well head. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Cut off deadmen. Cleaned location, moved off.

Spud Date:

Rig Release Date:

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms, www.cmrnd.state.nm.us/oed.

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

SIGNATURE

K. C.

TITLE *Lead Regulatory Analyst*

DATE *4/13/17*

Type or print name

Kanicia Castillo

E-mail address: *kcastillo@concho.com*

PHONE: *432-685-4332*

For State Use Only

APPROVED BY:

Rabit 2 Byrd

TITLE *COMPLIANCE OFFICER*

DATE *4/19/2017*

Conditions of Approval (if any):