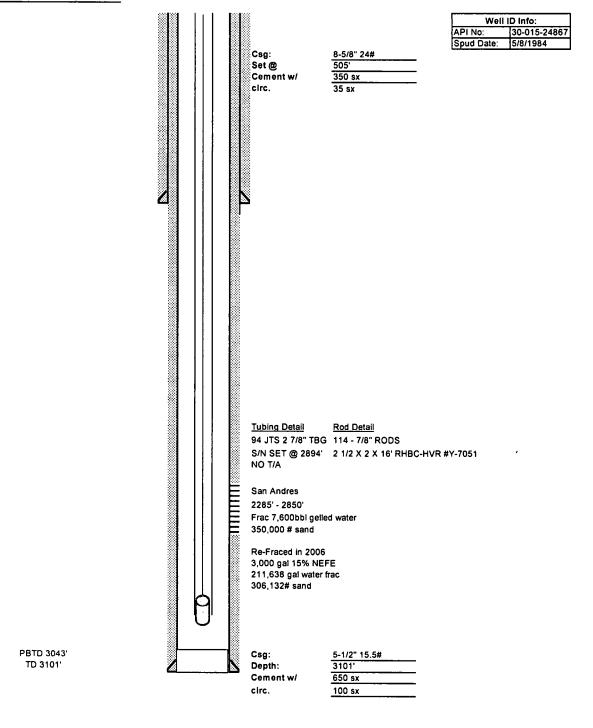
Officer 1931 393-461 Revised Jaay 18, 2013 Basel 1- (757) 748-103 OIL CONSERVATION DIVISION 30-015-24867 Basel 1- (757) 748-103 OIL CONSERVATION DIVISION 30-015-24867 Basel 1- (757) 748-103 Santa Pe, NM 8270 Basel 1- (757) 748-103 Santa Pe, NM 8770 DO your use mussion normonic normoni	Submit I Copy To Appropriate District	State of	New Me	exico		Form C-103	
Desired (373) 748-1221 OIL CONSERVATION DIVISION 30-015-24867 113: First 3. Areasi, NM 8210 OIL CONSERVATION DIVISION 31-015-24867 Desire 10* (50) 748-7430 Santa Fe, NM 8700 Santa Fe, NM 8700 Desire 10* (50) 748-7430 Santa Fe, NM 8700 Santa Fe, NM 8700 Desire 10* (50) 748-7430 Santa Fe, NM 8700 Santa Fe, NM 8700 Desire 10* (50) 748-7430 SubDR PROTOSALS TO BALL ON TO DEEREN OF LOG BACK TO A Desire 10* (50) 748-7430 SubDR PROTOSALS TO BALL ON TO DEEREN OF LOG BACK TO A Desire 10* 108 Full ON HOR MOROSALS TO BALL ON TO DEEREN OF LOG BACK TO A Coller State COG Operator Gas Well O other 9. OGRID Number 220 State 777 10. Pool name or Wildoat Red Latest OP or Coller State 11. Elevation (Show whether DR, RKR, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON SI Coller State, Including estimated date of stating any proposed or completed operations. (Clearly state all perfremt details, and give perfinent dates, including estimated date of stating any proposed or Completed operations. (Clearly state all perfremt details, and give perfinent dates, including estimated date of stating any proposed ore completed operations. (Clearly state all perfremt deta	District 1 - (575) 393-6161	Energy, Minerals and Natural Resources					
8115 First S. Areals NM 8210 OLD CONSERVATION DIVISION 8115 First S. Areals NM 8210 Santa Fe, NM 87505 1220 S.S. Firsts D., Santa Fe, NM Santa Fe, NM 87505 8135 Firsts D., Santa Fe, NM 8.19609 8135 Firsts D., Santa Fe, NM 8.19609 8135 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name COMPUTER THIS FORM FOR PROFESSION TO ENLIDE ON OF LUG BACK TO A 8. Well Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 9. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other 29. OCRID Number 13 1. Type of Well: OIL Well SG Gas Well Other SG Constance 9. OCRID Number 13 1. Stepe Of Well SG Gas Well	· · · ·						
1000 Receiver Advances Win 8740 1220 South St. Prancis Dr. STATE ST. STATE ST. STATE ST. 1200 Section 27, State 76, NM State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 1200 Section 27, State 76, NM State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 1200 Section 27, State 86, NM State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 1200 Section 28, Prescient 20, State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 1200 Section 20, State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 State 76, NM 8740 1200 Section 20, State 76, NM 8740 Gas Well Other 9, OCRID Number 13 2. Name of Operator 10, Pool name or Wildeat Red Lake; QN-GRBG-SA 4. Well Location 11, Elevation (Show whether DR, RKB, RT, GR, etc.) SUBSEQUENT REPORT OF: 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM RekeDal WORK PLUG AN AFADD ABARDON © CANNENCE DRLLING OPNS © PAND A © 13. Describe proposed or completed operations. Clearly state all perinent deatis, and give pertinent dates, including estinmated date of statring any proposed work). SEE RULE 19.15.7.14 N	811 S. First St., Artesia, NM 88210						
1200 S.S. Francis Dr., Samia Fe, NM B-1969 2705 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR REPORTS ON DERLO RACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR REPORT FORM C-101 FOR SUCH 7. Lease Name or Unit Agreement Name Collection State 1. Type of Well: Oil Well: Oil Well S Gas Well Other 9. OCRID Number 20137 2. Name of Operator 9. OCRID Number 20137 3. Address of Operator 9. OCRID Number 20137 4. Well ocation 10. Pool name or Wildcat Red Lake: QN-GRBG-SA 8. Well Number 2. Name of Operator 10. Pool name or Wildcat Red Lake: QN-GRBG-SA 8. Well Number 2. Name of Operator 10. Pool name or Wildcat Red Lake: QN-GRBG-SA 9. OCRID Number 2. Name of Operator 10. Pool name or Wildcat Red Lake: QN-GRBG-SA 9. OCRID Number 4. Well Ocation 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3117' GR SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ALTERING CASING DE Commercent Complexity and Bababoon SS Commercent Com	1000 Rio Brazos Rd., Aztec, NM 87410				STA	TE 🛛 FEE 🗌	
SUNDRY NOTICES AND REPORTS ON WELLS 7. Less Name or Unit Agreement Name CON OT USE THE FORM FOR PROCASLS TO BALLIO RO TO DEPRO REPORT RESERVICE. USE "APPLICATION FOR PREMIT (FORM C-101) FOR SUCH 7. Less Name or Unit Agreement Name COD OT USE THE FORM FOR PROCASLS TO BALLIO RO DEPROP OR PLUID BACK TO A 8. Well Number 13. 1. Type of Well: Oil Well @ Gas Well @ Other 9. OGRID Number 20137 3. Address of Operator 9. OGRID Number 20137 4. Well Location 10. Pool name or Wildcat Red Lake; QN-GRBG-SA 4. Well Location 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 3117' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON @ REMEDIAL WORK ALTERING CASING B COMMINGLE PULL OR ALTER CASING MULTIPLE COMPL COMMENCE ORILLING OPHS PADA ADD B COMENCE ORILLING OPHS PADA ADD ADD COMMONE COMMINGLE B IBOWNHOLE COMMINGLE COMMENCE PULUG AND ABANDON Ø COMENCE ORILLING OPHS PADA ADD ADD ADD ADD ADD ADD ADD ADD AD	1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe	5, INIVI 0				
DIFFERENT RESERVOR. USE "APPLICATION FOR FRMIT" (FORM C-101) FOR SUCH 8. Well Number 1. Type of Well: Oil Well @ Gas Well @ Other 9. OGRID Number 2. Name of Operator 9. OGRID Number COG Operating, LLC 229137 3. Address of Operator 9. OGRID Number COG Operator 10. Pool name or Wildcat 600 W. Illinois Ave, Midland, TX 79701 Red Lake; QN-GRBG-SA 4. Well Location 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 3117' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK PLUG AND ABANDON Ø COMMINGLE OTHER: OTHER: <td colsp<="" td=""><td>SUNDRY NOT</td><td></td><td></td><td></td><td colspan="2">7. Lease Name or Unit Agreement Name</td></td>	<td>SUNDRY NOT</td> <td></td> <td></td> <td></td> <td colspan="2">7. Lease Name or Unit Agreement Name</td>	SUNDRY NOT				7. Lease Name or Unit Agreement Name	
PROPOSALS) 8. Well Will G as Well Other 1. Type of Well: Oil Well G as Well Other 9. OGRID Number 2. Name of Operator 9. OGRID Number 3. Address of Operator 10. Pool name or Wildcat 60 W.Illinois Ave, Midland, TX 79701 10. Pool name or Wildcat 4. Well Location 10. Pool name or Wildcat 1.1. Elevation 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 1.1. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 1.1. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REPORT NETHING CASING 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 1.1. Describe proposed or completed operations. (Clearly state all pertiment details, and give pertiment 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. 1. Set 5 ¼" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag. 3. Part As 20 120 sx cmt @ 900-800'. WOC & Tag. 3. Spot 25 sx cmt @ 900-800'. WOC & Tag. 3. Part As 20 120 sx cmt @ 905-800'. WOC & Tag. 3. Spot 25 sx cmt @ 900-800'. WOC & Tag. 3. Spot 16 well head, ve	(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR USE "APPLI	SALS TO DRILL OR TO DEE	PEN OR PLI M C-101) F(UG BACK TO A			
2. Name of Operator 9. OGRID Number 2209 229137 3. Address of Operator 10. Pool name or Wildeat 600 W. Illinois Ave, Midland, TX 79701 10. Pool name or Wildeat 4. Well Location Unit Letter 1 Unit Letter 1 15 Range 28E NMPM County Eddy 10. Elevation (Show whether DR. RKB, RT, GR. etc.) 3117' GR 11. Elevation (Show whether DR. RKB, RT, GR. etc.) 3117' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON © OWWHOLE COMMINCE OHMENCE DRILLING OPNS PULL OR ALTER CASING MULTIPLE COMPL OOWWHOLE COMMINCE OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OWWHOLE COMMINCE OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER: OTHER:	PROPOSALS.)	_			8. Well Number 13		
COG Operating, LLC 229137 1. Address of Operator 10. Pool name or Wildcat 600 W. Illinois Ave, Mildland, TX 79701 Red Lake; QN-GRBG-SA 4. Well Location Unit Letter		Gas Well Other			9. OGPID Number		
600 W. Illinois Are, Midland, TX 79701 Red Lake; QN-GRBG-SA 4. Well Location Unit Letter: 1:550 feet from the line and 660 feet from the line Section 22 Township 17S Range 28E NMPM 11. Elevation (Show whether DR. RKB, RT, GR, etc.) 3117' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK	-						
4. Well Location Unit Letter L : 1650 _ feet from the	· ·						
Unit Letter L 1650 feet from the S line and 660 feet from the E line Section 22 Township 17S Range 28E NMPM County Eddy III. Elevation (Show whether DR, RKB, RT, GR, etc.) 3117' GR III. Elevation (Show whether DR, RKB, RT, GR, etc.) 3117' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS ALTERING CASING - PULL OR ALTER CASING OHANGE PLANS COMMENCE DRILLING OPNS - PAND A OWNHOLE COMMINGLE CASING/CEMENT JOB PAND A PAND A OWNHOLE COMMINGLE COLOSED-LOOF SYSTEM OTHER: OTHER: PAND A 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. Set 5 4'''' CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1960'. WOC & Tag. Start @ 200 Start @ 2235'. 1960'. WOC & Tag. Sist S 4''' CIBP @ 2235'. Circulate hole w/ MLF		<pre>< 79701</pre>			Red Lake; QN-GRBG-SA		
Section 22 Township 17s Range 28E NMPM County Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3117' GR 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) Subsequent to the second of the train of train of the train of train of the train of train train of train							
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3117 GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON © PULL OR ALTER CASING MULTIPLE COMPL DOWNHOLE COMMINGLE COMMENCE DENTILING OPNS DOWNHOLE COMMINGLE OTHER: OTHER: 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. 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. 14. Set 5 ¼" CIBP @ 2235". Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1900". WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800". WOC & Tag 3. Pert & Squ 210 sx cmt @ 555 Scirfac. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. Received Spud Date: Rig Release Date: Rig Release Date: Rig Release Date: Start Le							
3117' 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 ORILLING OPNS PUL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: OSpot 25 sx cmt @ 900-800'. WOC & Tag Spot 25 sx cmt @ 900-800'. WOC & Tag Spud Date: Received Marriey OCD						County Eddy	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON A TEMPORARILY ABANDON CHANGE PLANS DUL OR ALTER CASING MULTIPLE COMPL DOWNHOLE COMMINGLE COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB DOWNHOLE COMMINGLE MULTIPLE COMPL DOWNHOLE COMMINGLE 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. 1. Set 5 ¼" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag. 3. Pert 4 Sog 120 sx cmt @ 900-800'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag. 3. Pert 4 Sog 120 sx cmt @ 900-800'. WOC & Tag. B. Pert 4 Sog 120 sx cmt @ 900-800'. WOC & Tag. Sput 25 sx cmt @ 900-800'. WOC & Tag. 3. Proved bate: Rig Release Date: PHONE: Rig Release Date: Matter Matt Loc A_1 Ther				, 100 <i>D</i> , 107, 017, 017, 010,	/		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PAND A DULL OR ALTER CASING MULTIPLE COMPL COMMENCE DRILLING OPNS PAND A DOWNHOLE COMMINGLE MULTIPLE COMPL COMMENCE DRILLING OPNS PAND A COSED-LOOP SYSTEM OTHER: OTHER: Commence of the							
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE OTHER: 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. 1. Set 5 ¼" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag 3. Perf & Sqz 120 sx cmt @ 955-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. RECEIVED Wurify OCD 24 hrs. prior ho ony work done. OCT @ 9 2018 DISTRICT II-ARTESIA O.C.D. Spud Date: Rig Release Date: Wirify OCD 4 St St of my knowledge and beftef. SIGNATURE SIGNATURE Attact Mediagramery TITLE Agent APPROVED BY: APPROVED BY: TITLE Staft							
DOWNHOLE COMMINGLE 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. 1. Set 5 ½" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag 3. Perf & Sqz 120 sx cmt @ 555-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. RECEIVED w: fty OCD 24 hrs . prior to only work done. OCT @ 9 2018 District II-ARTESIA O.C.D. Spud Date: Rig Release Date: Hereby certify that the information above is true and complete to the best of my knowledge and beltef. SIGNATURE SIGNATURE Approved BY: APPROVED BY: APPROVED BY:	TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR				ILLING OPNS		
CLOSED-LOOP SYSTEM OTHER: 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. 1. Set 5 ½" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test esg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag 3. Perf & Sqz 120 sx cmt @ 555-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. RECEIVED ****? Y OCD 24 hrs . prior to only work clone. 0CT @ 9 2018 DISTRICT II-ARTESIA O.C.D. Spud Date: Rig Release Date: Rig Release Date: Hereby certify that the information above is true and complete to the best of my knowledge and beltef. SIGNATURE SIGNATURE Attach gail Montgornery For State Use Only TITLE APPROVED BY: APPROVED BY:		MULTIPLE COMPL		CASING/CEMEN	T JOB		
OTHER: 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. 1. Set 5 ¼" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test esg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag 3. Perf & Sqz 120 sx cmt @ 555-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. RECEIVED workty OCD 24 hrs. prior to ony work done. 0CT 0. 9 2018 DISTRICT II-ARTESIA O.C.D. Spud Date: Rig Release Date: Workty that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Agent DATE 10 3 2018 Type or print name Abigail Montgomery For State Use Only APPROVED BY: APPROVED BY:							
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Set 5 ½" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Spot 40 sx cmt @ 2235-1900'. WOC & Tag. (San Andres) Source 900-800'. WOC & Tag Perf & Sqz 120 sx cmt @ 555-Surface. Cut off well head, verify cement to surface, weld on Dry Hole Marker. Exercise The set of the surface of the surface of the surface of the surface of the set of the surface of the su	OTHER:						
(San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag 3. Perf & Sqz 120 sx cmt @ 555-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. Image: State Use Only Spud Date: Image: State Use Only Signature Abigail Montgomery For State Use Only APPROVED BY: Image: State Use Only	of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of						
(San Andres) 2. Spot 25 sx cmt @ 900-800'. WOC & Tag 3. Perf & Sqz 120 sx cmt @ 555-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. Image: State Use Only Spud Date: Image: State Use Only Signature Abigail Montgomery For State Use Only APPROVED BY: Image: State Use Only	1. Set 5 1/2" CIBP @ 2235'. Circulate hole w/ MLF. Pressure test csg. Snot 40 sy cmt @ 2235-1000'. WOC & Tog						
 3. Perf & Sqz 120 sx cmt @ 555-Surface. 4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. RECEIVED W: fy OCD 24 hrs. prior to any work done. OCT @ 9 2018 DISTRICT II-ARTESIA O.C.D. Spud Date: Rig Release Date: Rig Release Date: K See Attached COA's I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE down Montgomerry TITLE Agent TITLE Agent DATE 10/3/2018 PHONE: 432-580-716. APPROVED BY: APPROVED BY: 	(San Andres)						
4. Cut off well head, verify cement to surface, weld on Dry Hole Marker. RECEIVED With OCD 24 hrs. prior to any work done. OCT @ 9 2018 DISTRICT II-ARTESIA O.C.D. Spud Date: Rig Release Date: <u>H See Attach COAS</u> I hereby certify that the information above is true and complete to the best of my knowledge and befief. SIGNATURE <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>Approved By:</u> <u>APPROVED BY:</u> <u>APPROVED BY:</u> <u>Market</u> <u>SIGNATURE</u> <u>APPROVED BY:</u> <u>Market</u> <u>SIGNATURE</u> <u>APPROVED BY:</u> <u>Market</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>COMP</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u>SIGNATURE</u> <u></u>							
Heceived Interest Heceived Heceived Heceived Interest Heceived Heceived Heceived Heceived Interest Heceived			on Dry Ho	le Marker.			
Image: Spud Date: OCT 0 9 2018 Spud Date: Rig Release Date: Image: Spud Date: Image: Spud Date: Image: Spud Date: Rig Release Date: Image: Spud Date: Image: Spud Date: Image: Spud Date: Rig Release Date: Image: Spud Date: Image: Spud Date: Image: Spud Date: Image: Spud Date: SIGNATURE Attribution above is true and complete to the best of my knowledge and bellef. SIGNATURE Attribution above: Image: Spud Date: Type or print name Abigail Montgomery E-mail address: E-mail address: PHONE: You Poil Date: You Poil Date: APPROVED BY: TITLE Staff Mar. DATE 10-10-18 Date 10-10-18			v			RECEIVED	
DISTRICT II-ARTESIA O.C.D. Spud Date: <u>K See Attach COA's</u> I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE <u>Use only</u> Type or print name <u>Abigail Montgomery</u> E-mail address. <u>For State Use Only</u> APPROVED BY: <u>Mast See Playsed by</u> <u>DATE 10/3/2018</u> E-mail address. <u>DATE 10/3/2018</u> <u>B-mail address</u> <u>DATE 10/3/2018</u> <u>DATE 10/3/2018</u>							
Spud Date: Rig Release Date: # See Attach COA's M_st be placed by 10-10-19 I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Ibigail Meniopomery Type or print name Abigail Montgomery For State Use Only E-mail address. APPROVED BY: TITLE Approved BY: TITLE			any wo	rk done.		OCT 0 9 2018	
Spud Date: Rig Release Date: # See Attach COA's M_st be placed by 10-10-19 I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Ibigail Meniopomery Type or print name Abigail Montgomery For State Use Only E-mail address. APPROVED BY: TITLE Approved BY: TITLE	•						
# See Attached COA's Mast be playsed by 10-10-19 I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 10/3/2018 SIGNATURE Mast be playsed by the best of my knowledge and belief. DATE 10/3/2018 SIGNATURE Mast be playsed by the best of my knowledge and belief. DATE 10/3/2018 Type or print name Abigail Montgomery E-mail address: DATE 10/3/2018 For State Use Only For State Use Only TITLE Staff Ms- DATE 10-10-18	<u></u>			· · · · · · · · · · · · · · · · · · ·	D	ISTRICT II-ARTESIA O.C.D.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Image: Ima	Spud Date:	Rig F	Release Da	ite:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Image: Ima				L			
SIGNATURE Abigail Montgomery TITLE Agent DATE 10/3/2018 Type or print name Abigail Montgomery E-mail address. Com For State Use Only PHONE: 432-580-7161 APPROVED BY: March DATE 10-10-18	* See ATTAched			Must be	Plassio	5, 10-10-19	
APPROVED BY: ALT DATE 10-10-18	I hereby certify that the information	above is true and complet	te to the be	est of my knowledg	e and belief.	/	
APPROVED BY: ALT DATE 10-10-18		\sim					
APPROVED BY: ALT DATE 10-10-18	SIGNATURE Aligni Mon	gomerus) TITI	E Aqu	<u>st</u>		DATE 10 3 2018	
APPROVED BY: ALT DATE 10-10-18	Type or print name AL · · · · · · · · ·		able	mebernanda	ussociates.	Com	
APPROVED BY: ALT DATE 10-10-18	For State Use Only	ontgomeny E-ma	an address	<u> </u>	<u></u>	PHUNE: 432-580-7161	
Conditions of Approval (if any):							
		TITL	E <u>_7</u> A	TT Mg-		DATE 10-10-10	

46707

.

.

Collier State #13



32.8173294 -104.1**5**74631

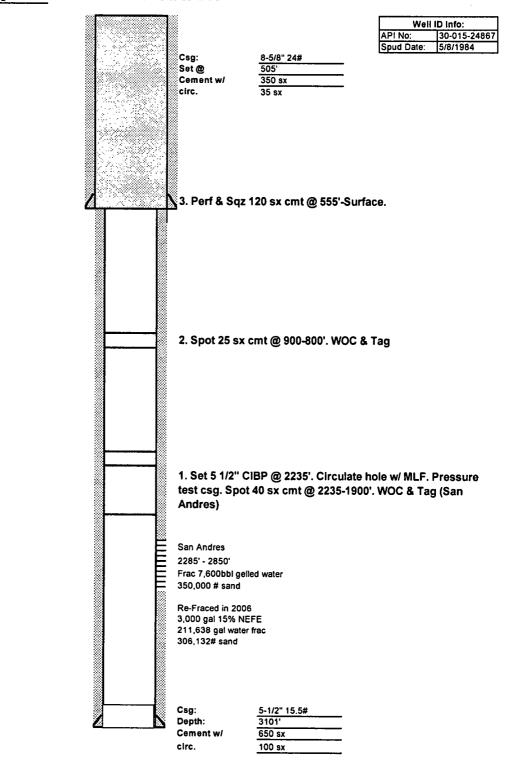
.

.

PBTD 3043

TD 3101'

Collier State #13



46707

4

٠

CONDITIONS FOR PLUGGING AND ABANDONMENT

District II / Artesia N.M.

The following is a guide or checklist in preparation of a plugging program, this is not all inclusive and care must be exercised in establishing special plugging programs in unique and unusual cases, Notify NMOCD District Office II at (575)-748-1283 at least 24 hours before beginning work.

- 1. A notice of intent to plug and abandon a wellbore is required to be approved before plugging operations are conducted. A cement evaluation tool is required in order to ensure isolation of producing formations, protection of water and correlative rights. A cement bond log or other accepted cement evaluation tool is to be provided to the division for evaluation if one has not been previously run or if the well did not have cement circulated to surface during the original casing cementing job or subsequent cementing jobs.
- 2. Closed loop system is to be used for entire plugging operation. Upon completion, contents of steel pits are to be hauled to a permitted disposal location.
- 3. Trucking companies being used to haul oilfield waste fluids to a disposal commercial or private shall have an approved NMOCD C-133 permit. A copy of this permit shall be available in each truck used to haul waste products. It is the responsibility of the operator as well as the contractor, to verify that this permit is in place prior to performing work. Drivers shall be able to produce a copy upon request of an NMOCD Field inspector.
- 4. Filing a subsequent C-103 will serve as notification that the well has been plugged.
- 5. A final C-103 shall be filed (and a site inspection by NMOCD Inspector to determine if the location is satisfactorily cleaned, all equipment, electric poles and trash has been removed to Meet NMOCD standards) before bonding can be released.
- 6. If the well is not plugged within 1
- 7. If work has not begun within 1 Year of the approval of this procedure, an extension request must be file stating the reason the well has not been plugged.
- 8. Squeeze pressures are not to exceed 500 psi, unless approval is given by NMOCD.
- 9. Produced water will not be used during any part of the plugging operation.
- 10. Mud laden fluids must be placed between all cement plugs mixed at 25 sacks per 100 bbls of water.
- 11. All cement plugs will be a minimum of 100' in length or a minimum of 25 sacks of cement, whichever is greater. 50' of calculated cement excess required for inside casing plugs and 100% calculated cement excess required on outside casing plugs.
- 12. Class 'C' cement will be used above 7500 feet.
- 13. Class 'H' cement will be used below 7500 feet.
- 14. A cement plug is required to be set 50' above and 50' below, casing stubs, DV tools, attempted casing cut offs, cement tops outside casing, salt sections and anywhere the casing is perforated, these plugs require a 4 hour WOC and then will be tagged
- 15. All Casing Shoes Will Be Perforated 50' below shoe depth and Attempted to be Squeezed, cement needs to be 50' above and 50' Below Casing Shoe inside the Production Casing

- 16. When setting the top out cement plug in production, intermediate and surface casing, wellbores should remain full at least 30 minutes after plugs are set
- 17. A CIBP is to be set within 100' of production perforations, capped with 100' of cement, WOC 4 hours and tag.
- 18. A CIBP with 35' of cement may be used in lieu of the 100' plug if set with a bailer. This plug will be placed within 100' of the top perforation, (WOC 4 hrs and tag).
- 19. No more than **3000'** is allowed between cement plugs in cased hole and 2000' in open hole.
- 20. Some of the Formations to be isolated with cement plugs are: These plugs to be set to isolate formation tops
 - A) Fusselman
 - B) Devonian

· '

- C) Morrow
- D) Wolfcamp
- E) Bone Springs
- F) Delaware
- G) Any salt sections
- H) Abo
- I) Glorieta
- J) Yates.
- K) Potash--- (In the R-111-P Area (Potash Mine Area), a solid cement plug must be set across the salt section. Fluid used to mix the cement shall be saturated with the salts that are common to the section penetrated and in suitable proportions, not more than 3% calcium chloride (by weight of cement) will be considered the desired mixture whenever possible, WOC 4 hours and tag, this plug will be 50' below the bottom and 50' above the top of the Formation.
- 21. If cement does not exist behind casing strings at recommended formation depths, the casing can be cut and pulled with plugs set at recommended depths. If casing is not pulled, perforations will be shot and cement squeezed behind casing, WOC and tagged. These plugs will be set 50' below formation bottom to 50' above formation top inside the casing

DRY HOLE MARKER REQUIRMENTS

The operator shall mark the exact location of the plugged and abandoned well with a steel marker not less than four inches in diameter, 3' below ground level with a plate of at least ¼" welded to the top of the casing and the dry hole marker welded on the plate with the following information welded on the dry hole marker:

1. Operator name2. Lease and Well Number3.API Number4. Unit Letter5. QuarterSection (feet from the North, South, East or West)6. Section, Township and Range7. Plugging Date8. County(SPECIAL CASES)------AGRICULTURE OR PRARIE CHICKEN BREEDING AREAS

In these areas, a below ground marker is required with all pertinent information mentioned above on a plate, set 3' below ground level, a picture of the plate will be supplied to NMOCD for record, the exact location of the marker (longitude and latitude by GPS) will be provided to NMOCD (We typically require a current survey to verify the GPS)