

**NM OIL CONSERVATION
ARTESIA DISTRICT**

OCT 29 2018

Form C-103
October 13, 2009

Submit 1 Copy 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
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

RECEIVED

| | | |
|---|--|---|
| 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. 30-015-44005 |
| 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. |
| 3. Address of Operator 2208 W. Main Street, Artesia, NM 88210 | | 7. Lease Name or Unit Agreement Name Myox 21 State Com |
| 4. Well Location Unit Letter <u>N</u> : <u>200'</u> feet from the <u>South</u> line and <u>1649'</u> feet from the <u>West</u> line Section <u>21</u> Township <u>25S</u> Range <u>28E</u> NMPM Eddy County | | 8. Well Number 35H |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2978' | | 9. OGRID Number 229137 |
| | | 10. Pool name or Wildcat Purple Sage; Wolfcamp |

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 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"/> APD Extension | | OTHER: <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

COG Operating LLC respectfully requests approval for the following changes to the original approved APD

SHL:
From: 200' FSL & 1679' FWL Sec. 21, T25S, R28E
To: 200' FSL & 1649' FWL Sec. 21, T25S, R28E

C102 attached.

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 Genesis Vasquez TITLE: Regulatory Assistant DATE: 10/24/18

Type or print name: Genesis Vasquez E-mail address: ggarzaperez@concho.com PHONE: (575) 748-6926

For State Use Only

APPROVED BY: Raymond R. Godany TITLE: Geologist DATE: 10/29/18
Conditions of Approval (if any):

DISTRICT I
1000 EBO BRAZOS DR., ROSWELL, NM 88240
Phone: (505) 882-8181 Fax: (505) 882-0720

DISTRICT II
511 S. FIRST ST., ARTESIA, NM 88210
Phone: (505) 748-1253 Fax: (505) 748-0782

DISTRICT III
1000 EBO BRAZOS DR., AZTEC, NM 87410
Phone: (505) 334-8178 Fax: (505) 334-8170

DISTRICT IV
1000 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 678-3463 Fax: (505) 678-3468

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | |
|----------------------------|-------------------------------------|------------------------------------|
| API Number 30-015-44005 | Pool Code 98220 | Pool Name Purple sage; Wolfcamp |
| Property Code 38521 | Property Name MYOX 21 STATE COM | Well Number 35H |
| OGRID No. 229137 | Operator Name COG OPERATING, LLC | Elevation 2978.0' |

Surface Location

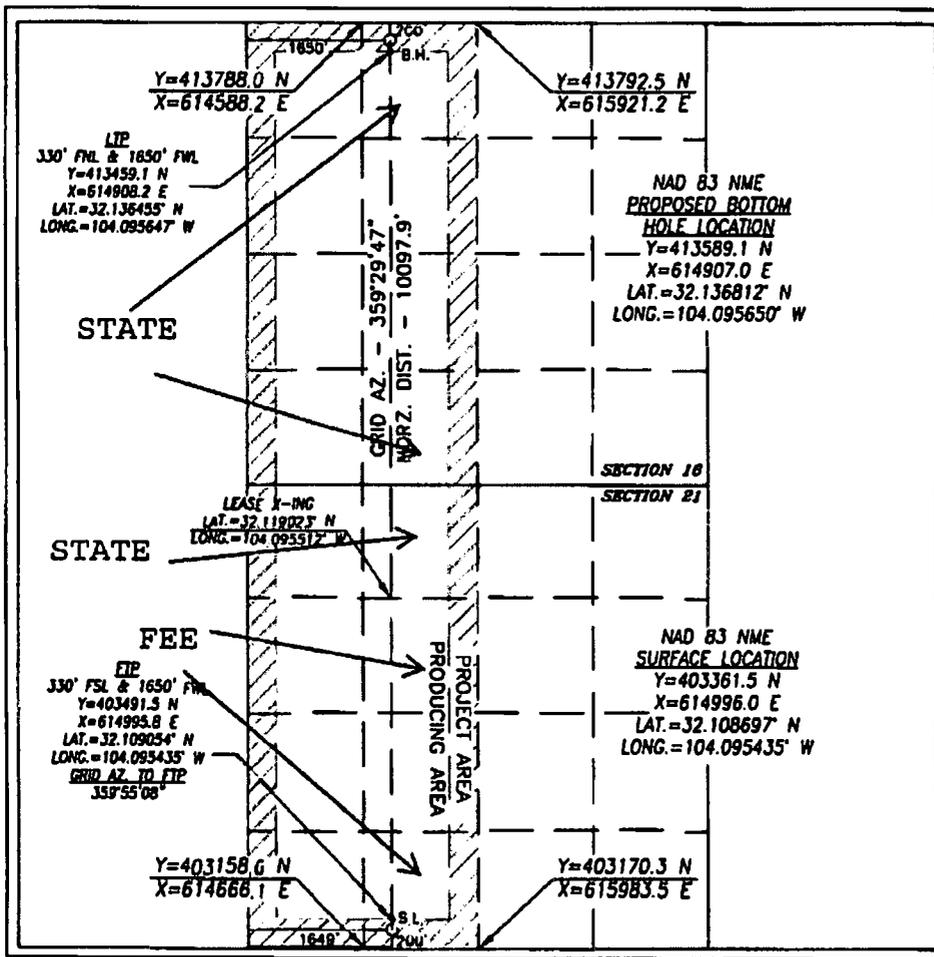
| UL or lot No. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| N | 21 | 25-S | 28-E | | 200 | SOUTH | 1649 | WEST | EDDY |

Bottom Hole Location If Different From Surface

| UL or lot No. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| C | 16 | 25-S | 28-E | | 200 | NORTH | 1650 | WEST | EDDY |

| | | | |
|------------------------|-----------------|--------------------|-----------|
| Dedicated Acres 640 | Joint or Infill | Consolidation Code | Order No. |
|------------------------|-----------------|--------------------|-----------|

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION
 I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.
 Signature: *Mat Rey* Date: 10/26/18
 Printed Name: **Mayte Reyes**
 E-mail Address: **mreyes1@concho.com**

SURVEYOR CERTIFICATION
 I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.
 AUGUST 10, 2018
 Date of Survey
 Signature & Seal of Professional Surveyor
 CHAD L. HARGROW
 NEW MEXICO
 17777
 LICENSED PROFESSIONAL SURVEYOR
 Signature: *Chad Hargrow* Date: 9/27/18
 Certificate No. CHAD HARGROW 17777
 W.O. 18-966 DRAWN BY: JH

RW 10/29/18