

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

Form C-103  
Revised July 18, 2013

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

WELL API NO. <b>30-015-24011</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>V-184</b>
7. Lease Name or Unit Agreement Name <b>Choctaw State</b>
8. Well Number <b>1</b>
9. OGRID Number <b>229137</b>
10. Pool name or Wildcat

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator <b>COG Operating, LLC</b>	
3. Address of Operator <b>600 W. Illinois Ave, Midland, TX 79701</b>	
4. Well Location Unit Letter <b>A</b> : <b>990</b> feet from the <b>N</b> line and <b>990</b> feet from the <b>E</b> line Section <b>16</b> Township <b>17S</b> Range <b>31E</b> NMPM County <b>Eddy</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3806.7'</b>	

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 checked="" 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"/>			
CLOSED-LOOP SYSTEM <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.

11/30/18 MIRU plugging equipment. 12/03/18 ND pump jack head, unseated pump. POH w/ rods & pump. Dug out cellar. NU BOP. POH w/ thg. Set 5 1/2" CIBP @ 3300'. Circulated hole w/ salt gel. Pressure tested csg, held 500 psi. Spotted 85 sx class C cmt @ 3300-2440'. WOC. 12/04/18 Tagged plug @ 2416'. Spotted 80 sx class C cmt w/ 2% CACL @ 2138-1329'. WOC. Tagged plug @ 1300'. Perf'd csg @ 735'. Pressured up on perms to 500 psi. ND BOP. Spotted 95 sx class C cmt @ 785' & circulated to surface. Rigged down & moved off. 12/10/18 Moved in backhoe and welder, dug out cellar, cut off well head, and verified cement to surface. Welded on "Below Ground Dry Hole Marker". Backfilled cellar, cut off deadmen, cleaned location, and moved off.

Spud Date:

Rig Release Date:

RECEIVED

DEC 13 2018

DISTRICT 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 Oretha Aaron TITLE Oper Engr Tech DATE 12-11-18  
Type or print name Oretha Aaron E-mail address: aaaron@concho.com PHONE: 432-818-2319  
For State Use Only

APPROVED BY: [Signature] TITLE Staff MS DATE 12-17-18  
Conditions of Approval (if any):

