

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>30-015-35660</b>
5. Indicate Type of Lease <b>STATE</b> <input checked="" type="checkbox"/> <b>FEE</b> <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Jalapeno State Com</b>
8. Well Number <b>1-H</b>
9. OGRID Number <b>229137</b>
10. Pool name or Wildcat <b>Santo Nino; Bone Spring</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>9176'</b>

**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.)

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>K</b> : <b>2310</b> feet from the <b>S</b> line and <b>2310</b> feet from the <b>W</b> line Section <b>32</b> Township <b>18S</b> Range <b>30E</b> NMPM County <b>Eddy</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>9176'</b>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☒  
CASING/CEMENT JOB ☐  
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.

02/04/19 MIRU Plugging equipment. POH w/ rods K-bars, & pump. 02/05/19 Dug out cellar. Pump'd 30 BBLS Brine H2O to kill well. NU BOP. POH w/ tbg. Set 5 1/2" CIBP @ 6100'. 02/06/19 Circulated hole w/ salt gel. Pressure test csg, held 500 psi. Spotted 25 sx class C cmt @ 3650-3400'. WOC. 02/07/19 Tagged plug @ 3390'. Perf csg @ 1543'. Pressured up on perfs to 500 PSI. Spot 25 sx class C cmt @ 1600-1350'. WOC. Tagged plug @ 1350'. Perf'd csg @ 1350'. Pressured up on perfs tp 500 PSI. Spotted 50 sx class C cmt @ 1350-850'. WOC. 02/08/19 Tagged plug @ 800'. Perf'd csg @ 428'. ND BOP. Sqz'd 150 sx class C cmt @ 428' & circulated to surface. Rigged down & moved off. 02/11/19 Moved in backhoe and welder, Dug out cellar, cut off well head, & verified cmt to surface. Welded on "Above Ground Dry Hole Marker". Backfilled cellar, cut off deadmen, cleaned location and moved off.

RECEIVED

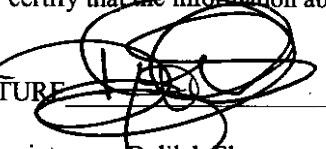
APR 01 2019

Spud Date:

Rig Release Date:

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  TITLE Regulatory Technician DATE 3/28/2019

Type or print name **Delilah Flores** E-mail address: **dflores2@concho.com** PHONE: 575-6946  
**For State Use Only**

APPROVED BY:  TITLE **Staff M.** DATE **4/2/19**  
Conditions of Approval (if any):