

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.<br>30-015-45752                                                                        |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br>Myox 30 State Com                                           |
| 8. Well Number 801H                                                                                 |
| 9. OGRID Number<br>229137                                                                           |
| 10. Pool name or Wildcat<br>Purple Sage; Wolfcamp 98220                                             |

**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 ☒ Gas Well ☐ Other ☐

2. Name of Operator  
COG Operating LLC

3. Address of Operator  
600 W. Illinois Ave., Midland, TX 79701

4. Well Location  
Unit Letter N 600 feet from the South line and 2160 feet from the West line  
Section 30 Township 25S Range 28E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3025' GR

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 checked="" 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"/>    |                                                  |                                                  |                                          |
| 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.

COG Operating LLC respectfully requests to change the dedicated acres for this well

FROM: 642.72

TO: 1282.72 ✓

Attached is the revised C102.

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 Robyn M. Russell TITLE Regulatory Analyst DATE 04/03/19  
Type or print name Robyn M. Russell E-mail address: Russell@concho.com PHONE: (432) 685-4385

For State Use Only

APPROVED BY: Raymond K. Poley TITLE Geologist DATE 5-7-19  
Conditions of Approval (if any):

DISTRICT I  
1625 N. FRENCH DR., HOBBS, NM 86240  
Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II  
811 S. FIRST ST., ARTESIA, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-0720

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

DISTRICT IV  
1220 S. ST. FRANCIS DR., SANTA FE, NM 87505  
Phone: (505) 478-3460 Fax: (505) 478-3460

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<br>30-015-45752 |  | Pool Code<br>98220                  |  | Pool Name<br>Purple Sage; Wolfcamp |  |
| Property Code<br>40178     |  | Property Name<br>MYOX 30 STATE COM  |  | Well Number<br>801H                |  |
| OGRID No.<br>229137        |  | Operator Name<br>COG OPERATING, LLC |  | Elevation<br>3025.2'               |  |

**Surface Location**

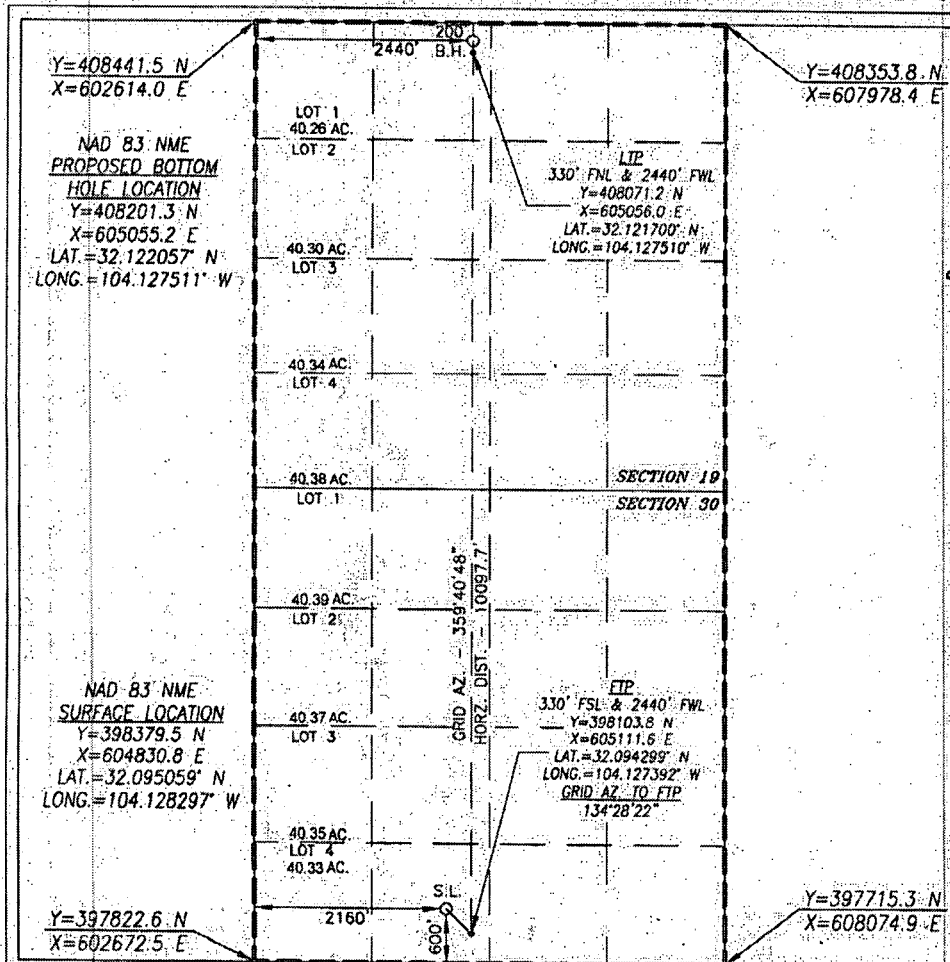
| UL or lot No. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| N             | 30      | 25-S     | 28-E  |         | 600           | SOUTH            | 2160          | 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             | 19      | 25-S     | 28-E  |         | 200           | NORTH            | 2440          | WEST           | EDDY   |

|                            |                                                        |                    |           |
|----------------------------|--------------------------------------------------------|--------------------|-----------|
| Dedicated Acres<br>1282.72 | Joint or Infill<br><input checked="" type="checkbox"/> | 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



|                                                                                                                                                                                                                                                                                                                                                                                                        |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>OPERATOR CERTIFICATION</b>                                                                                                                                                                                                                                                                                                                                                                          |                 |
| 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 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<br><i>Robyn M. Russell</i>                                                                                                                                                                                                                                                                                                                                                                   | Date<br>4/02/19 |
| Printed Name<br>Robyn M. Russell                                                                                                                                                                                                                                                                                                                                                                       |                 |
| E-mail Address<br>Russell@concho.com                                                                                                                                                                                                                                                                                                                                                                   |                 |
| <b>SURVEYOR CERTIFICATION</b>                                                                                                                                                                                                                                                                                                                                                                          |                 |
| 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.                                                                                                                                                                                          |                 |
| JANUARY 15, 2019                                                                                                                                                                                                                                                                                                                                                                                       |                 |
| Date of Survey                                                                                                                                                                                                                                                                                                                                                                                         |                 |
| Signature & Seal of Professional Surveyor                                                                                                                                                                                                                                                                                                                                                              |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                        |                 |
| Certificate No. CHAD HARCROW 17777                                                                                                                                                                                                                                                                                                                                                                     |                 |
| W.O. # 19-3 DRAWN BY: JH                                                                                                                                                                                                                                                                                                                                                                               |                 |

RWP 55-7-19