| Submit One Copy To Appropriate District Office State of New Mexico | | Form C-103 |
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| District I AND ON CONSISTS VINETALS and Natural Resources | | Revised November 3, 2011 |
| 1625 N. French Dr., Hobbs, NM 88240 ARTESIA DISTRICT | | WELL API NO. 30-015-35333 |
| 811 S. First St., Artesia, NM 88210 OCT 1 QILUCONSERVATION DIVISION | | N 5. Indicate Type of Lease |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. | | STATE FEE |
| District IV DECENTED Santa Fe, NM 8/505 | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | |
| SUNDRY NOTICES AND REPORTS OF | N WELLS | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | A Amigo Fee |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | 8. Well Number |
| 1. Type of Well: Oil Well Gas Well Other | | 1 . |
| 2. Name of Operator | | 9. OGRID Number |
| COG Operating LLC | | 229137 |
| 3. Address of Operator 2208 W Main Artesia NM 88210 | | 10. Pool name or Wildcat |
| | | Esperanza; Delaware |
| 4. Well Location | | |
| Unit Letter C: 1173 feet from the North line and 2100 feet from the West line | | |
| Section 10 Township 22S Range 27E NMPM County Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | |
| 11. Elevation (Show what is a state of the s | ether DR, RKB, RT, (| GR, etc.) |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | |
| 112. Check Appropriate Box to indicate Nature of N | office, Report of O | ther Data |
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING | | |
| TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐ | | |
| PULL OR ALTER CASING MULTIPLE COMPL | ☐ CASING/C | EMENT JOB |
| OTHER: | ∏ N Locati | on is ready for OCD inapportion offer D9 A |
| OTHER: | | |
| Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. | | |
| A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the | | |
| | | |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR | | |
| PERMANENTLY STAMPED ON THE MARKER'S SURFACE. | | |
| | | |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and | | |
| other production equipment. Meter Run Not Removed Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. | | |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. | | |
| If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with | | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsits concrete bases do not have | | |
| All metal holts and other materials have been removed P | rie de line ortable hases have hee | Premoved (Poured onsite concrete haves do not have |
| to be removed.) Old Tank Containent | Not Romance | (f (, le)) |
| to be removed.) 6) d Tank Containent | per OCD rules. | |
| Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines. This is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well | | |
| retrieved flow lines and pipelines. $\mathcal{T}_{S,S+J}$ Not \mathcal{L}_{E} and \mathcal{L}_{E} $\mathcal{L}_$ | | |
| location, except for utility's distribution infrastructure. | all electrical service p | oles and lines have been removed from lease and well |
| iocation, except for utility's distribution infrastructure. | | |
| When all work has been completed, return this form to the app | propriate District office | e to schedule an inspection. |
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| SIGNATURE A STATE OF THE STATE | ГІТLЕ: Regulatory Te | pch DATE: 10/17/2019 |
| | Togalmory To | 24121. 10/1/2017 |
| | IL: dflores2@concho | p.com PHONE: 575-748-6946 |
| For State Use Only | | G C |
| APPROVED BY | TITLE DEF | DATE 10/24/19 |
| APPROVED BY: Conditions of Approval (if any): | TITLE LY Main | DATE / 29/19 |
| Conditions of reprioral (if any). | | |