n <b>3</b>					
Submit One Copy To Appropriate Distr Office	51	ate of New Me	exico		Form C-103
District I NW	OIL CONSERVA	merals and Natu	ral Resources		Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240 District II				WELL API NO. 30-015-20531	
811 S. First St., Artesia, NM 88210 OCT 94LZ019NSERVATION DIVISION				5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410 1000 Rio Brazos Rd., Aztec, NM 87410				STATE FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505				6. State Oil & Gas Lease No. B-2071	
	OTICES AND REPO	RTS ON WELLS		7. Lease Name or I	Unit Agreement Name
(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				NG Phillips Sate 8. Well Number	
PROPOSALS.)      1. Type of Well:      \Box Oil Well      \Box Gas Well				10	
2. Name of Operator				9. OGRID Number	
COG Operating LLC				229137	
3. Address of Operator				10. Pool name or Wildcat	
2208 W Main Artesia NM 88210				Artesia; Q-GB-SA	
4. Well Location					
Unit Letter G 2645 feet					
Section <u>27</u> Townsh	hip <u>17S</u> Range <u>28E</u>				
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3649' GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
	INTENTION TO	).		SEQUENT REP	
PERFORM REMEDIAL WORK			REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A					
PULL OR ALTER CASING	MULTIPLE CON	MPL	CASING/CEMENT	ЈОВ 🗌	
OTHER:			M Location is re		tion offer D9 A
All pits have been remediate	d in compliance with	OCD rules and th	terms of the Oper	ady for OCD inspec	closure plan
$\overline{\boxtimes}$ Rat hole and cellar have bee	n filled and leveled.	Cathodic protection	on holes have been	properly abandoned.	elesure pluit.
$\boxtimes$ A steel marker at least 4" in	diameter and at least	4' above ground l	evel has been set in	concrete. It shows th	ne
OPEDATOD NAME I	LEACE NAME WE		DI NUMBER OF		
<u>OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR</u> <u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR</u>					
PERMANENTLY STA				IN HAS BEEN WEI	<u>IDED OK</u>
The location has been levele	d as nearly as possible	e to original grou	nd contour and has h	been cleared of all jur	ık, trash, flow lines and
other production equipment.	itsh on lo	CAT is a the st	- I'A PAST	re nd laval	
$\square$ If this is a one-well lease or $\square$	last remaining well or	n lease, the battery	v and pit location(s)	have been remediate	d in compliance with
OCD rules and the terms of the O	perator's pit permit a	ingl closure plan.	All flow lines, produ	action equipment and	junk have been removed
from lease and well location. $\bigwedge$ All metal bolts and other mat	surer Pole,	Lines	Not Remo	ve	
All metal bolts and other finat to be removed.)	erials have been remic	oved. Portable ba	ses have been remov	ved. (Poured onsite co	oncrete bases do not have
All other environmental con	cerns have been addr	essed as ner OCD	niles		
Pipelines and flow lines have				All fluids have been	removed from non-
retrieved flow lines and pipelines	l.				
If this is a one-well lease or $1$			al service poles and	l lines have been rem	oved from lease and well
location, except for utility's distri	bution infrastructure.				
When all work has been complete	ed, return this form to	the appropriate L	istrict office to sche	edule an inspection.	
Please creep tached.				1	
SIGNATURE		- תיין זיזיני	mulatory Taslasia'		TT 10/00/0010
SIGNATURE		111LE Re	gulatory Technician	DA	ГЕ 10/22/2019
TYPE OR PRINT NAME Delilat	n Flores	E-MAIL: dfl	ores2@concho.com	PHONE:	575-748-6946
For State Use Only					
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APPROVED BY:		TITLE			DATE 10/28/19

Conditions of Approval (if any):

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