

RECEIVED

NOV 19 2019

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  
DISTRICT IV-ARTESIA O.C.D.OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505Form C-103  
Revised July 18, 2013

<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.)		WELL API NO. 30-015-45549
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator COG Operating LLC		6. State Oil & Gas Lease No.
3. Address of Operator 2208 W. Main Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name SRO 4 State Com
4. Well Location Unit Letter <u>D</u> : <u>223</u> feet from the <u>North</u> line and <u>1160</u> feet from the <u>West</u> line Section <u>4</u> Township <u>26S</u> Range <u>28E</u> NMPM Eddy County		8. Well Number 503H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2990' GR		9. OGRID Number 229137
		10. Pool name or Wildcat Delaware River; Bone Spring

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: Completion Operations ☒

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.

5/1/19 Test annulus to 1500# for 30 mins. Good test. Set CBP @ 18,140'. Test to 8,450#. Good Test.

8/22/19 to 9/13/19 Perf 8,181 - 18,120' (1400). Acids w/ 54,600 gal 7-1/2%; frac w/ 20,166,801#sand & 15,424,500 gal fluid.

10/1/19 to 10/3/19 Drill out CFP's. Clean down to CBL @ 18,140'.

10/4/19 to 10/5/19 Set 2 7/8" 6.5# L-80 tbg @ 7,430' & pkr @ 7,420'. Installed gas lift system.

10/24/19 Began flowback & testing. Date of first production.

Spud Date:

2/19/19

Rig Release Date:

3/12/19

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Amanda Avery*

TITLE: Regulatory Analyst

DATE: 10/30/19

Type or print name: Amanda Avery

E-mail address: aavery@concho.com

PHONE: (575) 748-6962

## For State Use Only

APPROVED BY:

*[Signature]*

TITLE

Staff Mgr

DATE

11/20/19

Conditions of Approval (if any):