Office Office	State of New Mexico		Form C-103	
·District I	Energy, Minerals and Natural Resources			May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-015-34869	
District II 1301 W. Grand Ave., Artesia, NM 88210 CIL CONSERVATION DIVISION			Indicate Type of Lease	
District III 1220 South St. Francis Dr			STATE STATE	FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8	7505	State Oil & Gas Lease	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTICE	ES AND REPORTS ON WELL	S	7. Lease Name or Uni	
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA PROPOSALS.) 1. Type of Well: Oil Well 🔀 G	LS TO DRILL OR TO DEEPEN OR PI TION FOR PERMIT" (FORM C-101) I	HOTH 6 2001	HARPER	STATE
1. Type of Well: Oil Well G	as Well Other	MONTH TO 2007 MM	8. Well Number	009
2. Name of Operator	us wen omer	FEB ARTEST	9. OGRID Number	
COG Operating LLC oco			299	137
3. Address of Operator			10. Pool name or wildcat	
550 W. Texas Ave., Suite 1300 Midland, TX 79701			Loco Hills; G	Iorieta Yeso
Well Location				
	310 feet from the South	line and3	30feet from the _	East line
Section 16		Range 30E	NMPM	County Eddy
And the second s	11. Elevation (Show whether DI 3690	R, RKB, RT, GR, etc.) ' GR	100 m	
Pit or Below-grade Tank Application or C			<u> </u>	
Pit typeDepth to Groundwate	rDistance from nearest fresh	water well Dista	nce from nearest surface w	ater
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Cor	struction Material	
12. Check Ap	propriate Box to Indicate N	Nature of Notice. I	Report or Other Dat	a
•	•		•	
NOTICE OF INT			SEQUENT REPOR	
 -	PLUG AND ABANDON	REMEDIAL WORK	_	ERING CASING
	CHANGE PLANS MULTIPLE COMPL	COMMENCE DRIL	 -	ND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 📙	
OTHER: Request APD 1	year extension	OTHER:		
13. Describe proposed or complet	ted operations. (Clearly state all			
	t). SEE RULE 1103. For Multij	ole Completions: Atta	ach wellbore diagram o	f proposed completion
or recompletion.				
COG	Operating LLC respectf	ully requests per	mission	
	for a one year extens	• •		
	scheduled to exp			
I hereby certify that the information ab grade tank has been/will be constructed or clo	ove is true and complete to the b	est of my knowledge	and belief. I further cert	tify that any pit or below-
grade tank has been with the constructed of the	sed according to NATOCD guidennes	□, a general permit □ 0	or an (attached) afternative	OCD-approved plan □.
SIGNATURE / Kylles Ca	lacher the	Regulatory Analys	tDATE	2/15/07
Type or print name Phyllis A. Edwa	ards E-mail address: nedw	ards@conchoresource	es.com Telephone No	. 432-685-4340
For State Use Only	•		Join Telephone No	
BRYAN (G. ARRANT			FEB 1 9 2007
	T II GEOLOGIST TITLE		DA	.TE
Conditions of Approval (if any):				