| Submit 3 Copies 10 Appropriate District Office   | State of New Mexico  |  | Form C-103   |   |
|--|--|--|--|---|
| D <sub>i</sub> ct I  | Energy, Minerals and Natural Resources   |  | May 27, 2004<br>WELL API NO.                         |   |
| 16. V. French Dr., Hobbs, NM 88240<br>District II  | WALL CONGERNATION DE   |  | 30-015-34582   | 2                                       |
| 1301 W. Grand Ave., Artesia, NM 88210<br>District III  | IL CONSERVATION DI 1220 South St. Francis  | l 5. Indic   | ate Type of Lease                                    |   |
| 1000 Rio Brazos Rd., Aztec, NM 87410   | Santa Fe, NM 87505   | તાં છે   | TATE FE  | E 🗌                                     |
| District IV<br>1220 S. St. Francis Dr., Santa Fe, NM   | Santa TC, INIVI 87503  | Month 2000. State  | Oil & Gas Lease No                                   | )·                                      |
| 87505  | ES AND REPORTS ON WELLS  | OCD - ANTESIA NM 7. Lease                                | Nama or Unit Agra                                    | omant Nama                              |
| (DO NOT USE THIS FORM FOR PROPOSA  |  | ACK TO A   | Name or Unit Agre                                    | ement Name                              |
| DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.)   |  | JCH  | WHITE OAK ST   | TATE                                    |
|  | as Well 🔲 Other  | 8. Well  | Number 8   |   |
| 2. Name of Operator  |  |  | 9. OGRID Number                                      |   |
| 3. Address of Operator   | Operating LLC  | 10 Poo   | 229137<br>l name or Wildcat                          |   |
| 550 W. Texas Ave., Suite   | 1300 Midland, TX   | L L  | PIRE; YESO   | 96210                                   |
| 4. Well Location   |  |  |  |   |
| Unit Letter P :  | <del></del>  |  | from the <b>East</b>                                 | line                                    |
| Section 23   | Township 17S Ra 11. Elevation (Show whether DR, RK                                       | <u> </u>   | MPM Co   | ounty <b>EDDY</b>                       |
|  | 3680' GR   |  |  |   |
| Pit or Below-grade Tank Application 🗆 or C   | losure 🗵   |  |  |   |
| Pit type <u>DRILLING</u> Depth to Grounds  | vater 125' Distance from nearest fresh   | water well1000'_ Distance                                | e from nearest surface w                             | ater1000'                               |
| Pit Liner Thickness: 12 mil B  | elow-Grade Tank: Volume b  | bls; Construction Material                               |  |   |
| 12. Check Ap   | propriate Box to Indicate Natur  | e of Notice, Report of                                   | or Other Data  |   |
| NOTICE OF INT  | ENTION TO:   | SUBSEQUE   | NT REPORT O  | )F·                                     |
| _  | I  | MEDIAL WORK  |  | G CASING                                |
| TEMPORARILY ABANDON  |  |  |  |   |
| PULL OR ALTER CASING   | MULTIPLE COMPL   | ASING/CEMENT JOB   |  |   |
| OTHER: Pit closure   | ⊠ on   | HER:   |  |   |
|  | ed operations. (Clearly state all perti  |  | tinent dates, includin                               | g estimated date                        |
|  | ). SEE RULE 1103. For Multiple C   | ompletions: Attach wellb                                 | ore diagram of prop                                  | osed completion                         |
| or recompletion.   |  |  |  |   |
|  |  |  |  |   |
|  |  |  |  |   |
| COG Operating LLC  | respectfully requests a 45 day ext   | ension to the 6 month t                                  | oit closure deadline                                 | <u> </u>                                |
| COG Operating LLC respectfully requests a 45 day extension to the 6 month pit closure deadline.  The reason for this request is due to excessive rainfall in the area. |  |  |  |   |
|  | ·  |  |  |   |
|  |  |  |  |   |
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|  |  |  |  |   |
| Therefore and Grahad the information of  |  | C 1 1 - 1 1 1 - 1:                                       | -6 x 6 12 12 12 12                                   |   |
| I hereby certify that the information ab<br>grade tank has been/will-be constructed or clo   | ove is true and complete to the best of seed accor <u>ding</u> to NMOCD guidelines 🛛 , a | I my knowledge and belic<br>general permit  or an (attac | EL. I further certify tha<br>ched) alternative OCD-a | t any pit or below-<br>pproved plan []. |
|  |  |  |  |   |
| SIGNATURE / September 1  | Levard STIPLE R  | egulatory Analyst  | DATE   | 5- 18 -07                               |
| For State Use Only   | rds E-mail address: pedwards@c   |  | Telephone No. 4                                      | 32-685-4340                             |
| APPROVED BY:   | 1.1 2  |  |  | <del>-</del>                            |
| Conditions of Approval (if any)  | mW. Alexa  |  | DATE_  | 2/3//07                                 |
| -  | in W. Superou  | • '  | DATE   | 3/3/107                                 |