

Submit 3 Copies To Appropriate District Office
District I
1625 N French Dr, Hobbs, NM 88240
District II
1301 W Grand Ave, Artesia, NM 88210
District III
1000 Rio Brazos Rd, Aztec, NM 87410
District IV
1220 S St Francis Dr, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505



WELL API NO. 30-015-35718	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name G J West Coop Unit	
8. Well Number	166
9. OGRID Number 229137	
10. Pool name or Wildcat 97558 GJ; 7RVS-QN-GB-GLORIETA-YESO	

SUNDRY NOTICES AND REPORTS ON WELLS
(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)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐ **OCT 11 2007**

2. Name of Operator
COG Operating LLC **OCD-ARTESIA**

3. Address of Operator
550 W. Texas Ave., Suite 1300 **Midland, TX 79701**

4. Well Location
Unit Letter **I** : **1650** feet from the **South** line and **990** feet from the **East** line
Section **16** Township **17S** Range **29E** NMPM County **EDDY**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3559' GR

Pit or Below-grade Tank Application ☐ or Closure ☒

Pit type **DRILLING** Depth to Groundwater **110'** Distance from nearest fresh water well **1000'** Distance from nearest surface water **1000'**

Pit Liner Thickness: **12 mil** Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

09-13-07 Perforate w/ 2 SPF @ 5012 - 5208, 30 holes.
09-14-07 Acidize w/ 2500 gals acid. Frac w/ 78,695 gals gel, 5,532# LiteProp 14/30, 66,656# 16/30 sand.
09-14-07 Perforate w/ 2 SPF @ 4735 - 4931, 30 holes.
09-15-07 Acidize w/ 3550 gals acid. Frac w/ 72,351 gals gel, 5,631# LiteProp 14/30, 56,544# 16/30 sand.
09-15-07 Perforate w/ 2 SPF @ 4456 - 4652, 30 holes. Acidize w/ 2500 gals.
09-15-07 Frac w/ 73,048 gals gel, 5,399# LiteProp 14/30, 55,209# 16/30 sand.
09-18-07 RIH w/ 167 jts. 2 7/8" J-55 tbg., SN @ 5228'. RIH w/ 2 1/2" x 2" x 24' RHTC pump. Hang well on.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE K. Carrillo TITLE Regulatory Analyst DATE 10-10-07

Type or print name **Kanicia Carrillo** E-mail address: **kcarrillo@conchoresources.com** Telephone No. **432-685-4332**
For State Use Only

FOR RECORDS ONLY
APPROVED BY: _____ TITLE _____ DATE **OCT 15 2007**
Conditions of Approval (if any): _____