

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. <b>30-015-34884</b>
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name <b>PAWNEE STATE</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	NOV 21 2007	8. Well Number <b>004</b>
2. Name of Operator <b>COG Operating LLC</b>	<b>OCD-ARTESIA</b>	9. OGRID Number <b>299137</b>
3. Address of Operator <b>550 W. Texas Ave., Suite 1300</b>	<b>Midland, TX 79701</b>	10. Pool name or Wildcat <b>Loco Hills; Glorieta Yeso</b>
Well Location Unit Letter <b>G</b> : <b>2115</b> feet from the <b>North</b> line and <b>1970</b> feet from the <b>East</b> line Section <b>16</b> Township <b>17S</b> Range <b>30E</b> NMPM County <b>Eddy</b>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3684' GR</b>		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Addition of Yeso Perfs ☒

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.

11-06-07 Perf @ 4370'- 4688', 1 SPF, 30 holes.  
11-07-07 Acidize w/2150 gals 15% HCL.  
11-08-07 Frac w/56,322 gals 40# Linear gel; 30,744 gals. 30# Linear gel; 8,000# LiteProp 125 14/30; 75,180# 16/30 white sand; 15,000# SiberProp 16/30 resin coated.  
11-09-07 RIH w/174 jts 2 7/8" tbg, SN @ 5661'. RIH w/2 1/2x2x24' 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 Carol Ann Lance TITLE Regulatory Analyst DATE 11/14/2007

Type or print name Carol Ann Lance E-mail address: clance@conchoresources.com Telephone No. 432-685-4395  
**For State Use Only**

APPROVED BY: Accepted for record - NMOCD TITLE \_\_\_\_\_ DATE 11/21/07  
Conditions of Approval (if any):