

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.<br><b>30-015-37757</b>   |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br><b>White Oak State</b>                                      |
| 8. Well Number<br><b>13</b>   |
| 9. OGRID Number<br><b>229137</b>  |
| 10. Pool name or Wildcat<br><b>96210<br/>Empire; Glorieta-Yeso</b>                                  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br><b>3680' GR</b>                               |

**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 ☐

2. Name of Operator  
**COG Operating LLC**

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

4. Well Location  
Unit Letter **P** : **330'** feet from the **South** line and **990'** feet from the **East** line  
Section **23** Township **17S** Range **28E** NMPM County **EDDY**

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ 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 ☐

SUBSEQUENT REPORT OF:

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

OTHER: **Change casing program** ☒

OTHER: ☐

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.

COG Operating LLC respectfully requests permission to change the casing program to:

| Type  | Hole Size    | Casing Type | Casing Weight/ft. | Setting Depth | Sacks of Cement | Est TOC |
|-------|--------------|-------------|-------------------|---------------|-----------------|---------|
| Surf  | 17.5         | 13.375      | 48                | 250           | 300             | 0       |
| Inter | 11 or 12-1/4 | 8.625       | 24                | 850           | 400             | 0       |
| Prod  | 7.875        | 5.50        | 17                | 5350          | 900             | 0       |

COG proposes to drill 17-1/2" hole to 250' w/ fresh water mud system, wt. 8.5, vis 28, set 13-3/8" casing & cement to surface. Drill 11" or 12-1/4" hole to 850' w/ brine mud system, wt 10, vis 30, set 8-5/8" casing & cement to surface. Drill 7 7/8" hole to 5350' w/ cut brine mud system, wt 9.1, vis 29-32, test Yeso formation and run 5 1/2" casing and cement to surface.

Note: On production string, a fluid caliper will be run, COG will attempt to circulate cement.

RECEIVED

NOV 1 2010

NMOCD ARTESIA

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 Robyn M. Odom TITLE Regulatory Analyst DATE 10-29-2010

Type or print name Robyn M. Odom E-mail address: rododom@conchoresources.com Telephone No. 432-685-4385

For State Use Only

APPROVED BY: [Signature] TITLE \_\_\_\_\_ DATE 11/1/2010  
Conditions of Approval (if any): 1