

Submitt 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

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

Form C-103  
May 27, 2004

*Amended*

WELL API NO. 30-015-27345
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-255
7. Lease Name or Unit Agreement Name GJ West Coop Unit
8. Well Number 112
9. OGRID Number 229137
10. Pool name or Wildcat <i>Grayburg Jackson, 7RVS-QN-G-SA, Empire-Yeso-East</i>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3590.6 RKB
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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, Suite 1300, Midland, TX 79701

4. Well Location  
Unit Letter L 1650 feet from the South line and 990 feet from the West line  
Section 16 Township 17S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3590.6 RKB

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth 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:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	OTHER: Amend 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.

- 3-27-93 Perf 2623-4238
- 3-29-93 Acidize 3967-4238 w/ 2000 gals 15% NE acid.
- 3-30-93 Re-acidize 3967-4238 w/ 54,000 gals heated gelled wtr and 32,000 gals treated gelled wtr & 32,000 gals heated 20% NE acid
- 3-31-93 Acidize 3650-3768 w/ 1000 gals 15% NE Acidize w/ 500 gals 15% NE
- 4-01-93 Swab 3455-3529 perfs. Acidize perfs 2926-3298 w/ 2000 gals 10% NE. Swab . Acidize 2623-2697 w/ 500 gals 10% NE.
- 4-3-93 Frac perfs 2623-3529 w/ 100,000 gals gelled wtr & 500 sx 20/40 and 500 sx 12/20, 500 sx 8/16 sand
- 4-7-93 RIH w/ rods & tbg. Landed tbg @ 4247'. Tbg anchor at 2433.

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 NMOC guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE *Diane Kuykendall* TITLE Production Analyst DATE 10/24/06

Type or print name Diane Kuykendall E-mail address: dkuykendall@conchoresources.com Telephone No. (432) 683-7443

For State Use Only

APPROVED BY: *RD Wade* TITLE DIST HP Supervisor DATE 01/21/2011

Conditions of Approval (if any):