Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103	
District I	Energy, Minerals and Natural Resources		WELLADING	June 19, 2008	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-015-31241		
1301 W Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease Federal		
District III 1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr.		STATE	FEE	
District IV	Santa Fe, NM 87505		6. State Oil & Gas Leas		
1220 S St. Francis Dr , Santa Fe, NM 87505		Federal Lease # NMLC	028784B		
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit	Agreement Name	
(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			Durch Vacly Unit		
PROPOSALS)			Burch Keely Unit 8. Well Number		
1. Type of Well: Oil Well			308		
2. Name of Operator			9. OGRID Number		
COG Operating LLC			229137		
3. Address of Operator			10. Pool name or Wildo		
550 W. Texas Ave., Suite 100 Midland, TX 79701			Grayburg Jackson;SR-Q-G-SA 28509		
4. Well Location					
Unit Letter A: 924 feet from the North line and 990 feet from the East line					
Section 30	Township 17S Range 30		Eddy County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3403 GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
NOTICE OF INTENTION TO: SUBSI				ERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS		RILLING OPNS. P AN		
PULL OR ALTER CASING	ALTER CASING				
DOWNHOLE COMMINGLE					
OTHER:	П	OTHER:	Pool Change	\bowtie	
	pleted operations. (Clearly state all p		Pool Change and give pertinent dates, inc		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.					
•		•			
COG Operating LLC respectfully request to have this well's pool changed from the Grayburg Jackson; SR-					
Q-G-SA (28509) to the Burch Keely-Glorieta-Upper Yeso (97918) in accordance with Order # R-10067-E.					
			RECE	IVED	
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			JUN O	1 2012	
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Spud Date:	Rig Release Da	ite:			
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE C	TITLE Le	ead Regulatory A	nalyst DATE_	4/23/12	
Type or print name Kanicia Castillo E-mail address: kcastillo@concho.com PHONE: 432-685-4332					
For State Use Only					
APPROVED BY: 1. J. JUN 0 6 2012					
APPROVED BY: (if any):	MILE OU	10g 1 _	DATE		