Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103  June 19, 2008
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II 1301 W. Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015- 39567
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease Federal  STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE  6. State Oil & Gas Lease No.
1220 S. St Francis Dr., Santa Fe, NM		Federal Lease # NMLC028784B
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	D 1 K 1 H '
PROPOSALS.)	<u> </u>	Burch Keely Unit  8. Well Number
1. Type of Well: Oil Well	Gas Well Other	8. Well Number
2. Name of Operator		9. OGRID Number
COG Operating LLC  3. Address of Operator		229137
	e., Suite 100 Midland, TX 79701	Grayburg Jackson; SR-Q-G-SA 28509
4. Well Location		
	feet from the North line and 1310 feet from	the East line
Section 4	Township 17S Range 30 E NMPM	Eddy County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	
12. Check A	Appropriate Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF IN	ITENTION TO: SUI	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON   REMEDIAL WO	RK
TEMPORARILY ABANDON		RILLING OPNS. P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEME	NT JOB
BOWN IOLE GOMMINGLE		
OTHER:	OTHER:	Pool Change
	leted operations. (Clearly state all pertinent details, a ork). SEE RULE 1103. For Multiple Completions: A	
or recompletion.	rky. SEE ROEE 1103. 101 Muniple Completions. 1	staten wendore diagram of proposed completion
COC Oneveting LLC recipe	offully request to have this well's most sho	mand from the Cuarbura InchangeD
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 Qrder # R-10067-E.		
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		JON 0 1.2012
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Spud Date:	Rig Release Date:	
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I hereby cartify that the information	above is true and complete to the best of my knowled	dra and haliaf
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SIGNATURE	TITLE Lead Regulatory Ar	<u>DATE 4/23/12</u>
Type or print name Kanicia Ca	Stillo E-mail address: kcastillo@concho.co	PHONE: 432-685-4332
For State Use Only	March Dil A	JUN 11 2012
APPROVED BY:	SIGOUN TITLE FPOIDUS!	DATE DATE
Conditions of Approval (if any):		