

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-015-39149</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>COG Operating LLC</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>One Concho Center - 600 W Illinois Ave Midland, TX 79701</b>		7. Lease Name or Unit Agreement Name <b>State 151729 3ROC</b>
4. Well Location Unit Letter <u>N</u> : <u>1130</u> feet from the <u>SOUTH</u> line and <u>2205</u> feet from the <u>WEST</u> line Section <u>15</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>EDDY</u>		8. Well Number <u>5</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3568'</b>		9. OGRID Number <b>229137</b>
		10. Pool name or Wildcat <b>Grayburg Jackson; 7RVRS-QS-GB-SA</b>

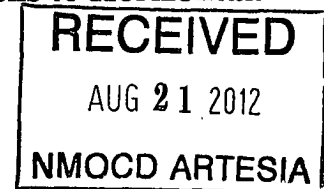
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <b>Cancel APD</b> <input checked="" type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**COG respectfully requests to cancel this APD due to changing wells to Horizontal.**

*eff 8-21-12*



Spud Date:  Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Permitting Tech DATE 08/21/2012  
Type or print name Kelly J. Holly E-mail address: kholly@concho.com PHONE: 432-685-4384  
**For State Use Only**  
APPROVED BY: [Signature] TITLE Deputy Supervisor DATE 9/4/12  
Conditions of Approval (if any):