Office Office	State o	f New Me	exico		Form C	
District I – (575) 393-6161	Energy, Mineral	s and Natu	ral Resources	WELL ADINO	Revised August 1,	, 2011
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283				WELL API NO. 30-015-41641		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of Lease		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.				FEE	
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505			6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
	ICES AND REPORTS (ON WELLS		7. Lease Name of	or Unit Agreement Na	me
(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.)				MYOX 32 State		
1. Type of Well: Oil Well Gas Well Other				8. Well Number		
2. Name of Operator				9. OGRID Numl		
COG Operating LLC	229137					
3. Address of Operator 2208 W. Main Street, Artesia, NM 88210				10. Pool name or Wildcat Delaware River; Bone Spring		
4. Well Location						
Unit Letter O:	190 feet from t		h line and			ie
Section 32			Range 28E	NMPM	Eddy! Coun	ity
* * * * * * * * * * * * * * * * * * * *	11. Elevation (Show)) %		
	<u></u>	3003	GK			## J
12. Check A	Appropriate Box to I	ndicate N	ature of Notice,	Report or Other	Data	
NOTICE OF IN	ITENTION TO:		l QUE	SEQUENT RE	DODT OF:	
NOTICE OF INTENTION TO: SUB PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					ALTERING CASING	; []
				ILLING OPNS.	P AND A	^ H
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN				 -		
DOWNHOLE COMMINGLE						
OTHER:		П	OTHER: (Completion Opera	ations	\bowtie
13. Describe proposed or comp	oleted operations. (Clear	rly state all i				
of starting any proposed we proposed completion or rec	ork). SEE RULE 19.15.					a date
11/8/13 MIRU testers. Test 9 5/8"	v 5 1/2" annulus to 1000	Test go	ad Parforato Pona	Spring 12290 1220	00' (60) le parform	
injection test	x 3 1/2 amulus to 1000	m. Test got	od. Perforate Bone	Spring 12360-1235	70 (00) & periorii	
,						
1/7/14 to 1/9/14 Perforate Bone Spi 2677332 gal fluid.	ring 8130-12320' (506).	Acdz w/68	3566 gal 7 1/2% aci	d. Frac w/3286749	# sand &	
1/13/14 Began flowing back & testi	ng.				Darly from the family	
1/22/14 to 1/24/14 Drill out all frac plugs. Circulate clean.					RECEIV	ED
1/31/14 Gas lift system installed.					FEB 2 1 20)14
					LAMOCD ART	"EOIA
Spud Date: 10/15/1	3 Rig	g Release Da	ate:	11/1/13	THE PARTY	CONT
I hereby certify that the information	above is true and comp	lete to the bo	est of my knowledg	ge and belief.	 	
SIGNATURE SIGNATURE	TI TI	TLE: R	Regulatory Analyst]	DATE: <u>2/7/14</u>	
Type or print name: Stormi Da	vis E-	mail addres	s: <u>sdavis@conch</u>	o.com	PHONE: (575) 748-6	594 <u>6</u>
For State Use Only	0	A			/	
APPROVED BY:	<u></u>		-H Douses	<u></u>	ATE 3/6/14	
Conditions of Approval (if any):	11		7	DF	112 -/ -/ -/	