

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

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-03795
2. Name of Operator COG OPERATING LLC		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 600 W. ILLINOIS AVE., MIDLAND, TEXAS 79701		6. State Oil & Gas Lease No. B-2023
4. Well Location Unit Letter; E ; 2310 feet from the NORTH line and 990 feet from the WEST line Section 36 Township 17S Range 29E NMPM EDDY County		7. Lease Name or Unit Agreement Name WESTALL B STATE
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,561' - GR		8. Well Number 004
9. OGRID Number 229137		10. Pool name or Wildcat GRAYBURG-JACKSON;QN-GB-SA

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: WELL PLUGGED AND ABANDONED 03/11/14.
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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.

03/07/14: SET 7" CIBP @ 2,475'; CIRC. WELL W/ PXA FLUID; PUMP 55 SXS. CMT. @ 2,475'-2,275' (CALC.).
 03/08/14: PERF. SQZ. HOLES @ 1,330'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 500# X HOLD; PUMP 90 SXS. CMT. @ 1,386' (PER NMOCD); WOC X TAG CMT. PLUG @ 850'.
 03/09/14: PERF. X SQZ. 45 SXS. CMT. @ 535'; WOC X TAG CMT. PLUG @ 300'; PERF. SQZ. HOLES @ 63'; ATTEMPT TO EST. INJ. RATE-PRES. UP TO 500# X HOLD; MIX X CIRC. TO SURF. 30 SXS. CMT. @ 113'-3' (PER NMOCD); WOC.
 03/10/14: TAG CMT. PLUG @ 60'; MIX X CIRC. TO SURF. 20 SXS. CMT. @ 60'-3'; WOC X TAG CMT. PLUG @ 2'.
 03/11/14: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

DURING THIS PROCEDURE WE USED THE CLOSED-LOOP SYSTEM W/ A STEEL TANK AND HAULED CONTENTS TO THE REQUIRED DISPOSAL, PER OCD RULE 19.15.17.

Spud Date: MIRU: 03/06/14

Rig Release Date: RDMO: 03/11/14



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

SIGNATURE David A. Eyer TITLE: AGENT DATE: 03/25/14

Type or print name: DAVID A. EYLER E-mail address: DEYLER@MILAGRO-RES.COM PHONE: 432.687.3033

For State Use Only

APPROVED BY: David A. Eyer TITLE: Dist. Rep. Supervisor

Conditions of Approval (if any):

** Submit Subsequent C-103*

Approved for plugging of well bore only. Liability under this form is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Form: www.emnrd.state.nm.us/oed.

3/25/14