

Submit 1 Copy To Appropriate Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1285  
 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

**NM OIL CONSERVATION**

ARTESIA DISTRICT

FEB 9 2015

RECEIVED

State of New Mexico  
 Energy, Minerals and Natural Resources

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

Form C-103

Revised August 1, 2011

<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.) 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-42129																								
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 2208 W. Main Street, Artesia, NM 88210		6. State Oil & Gas Lease No.																								
4. Well Location Unit Letter <u>B</u> : <u>190</u> feet from the <u>North</u> line and <u>2020</u> feet from the <u>East</u> line Section <u>17</u> Township <u>26S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		7. Lease Name or Unit Agreement Name SRO State Com																								
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3081' GR		8. Well Number 65H																								
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  <table border="0"> <tr> <td colspan="2"><b>NOTICE OF INTENTION TO:</b></td> <td colspan="2"><b>SUBSEQUENT REPORT OF:</b></td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>P AND A <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td>DOWNHOLE COMMINGLE <input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>OTHER: <input type="checkbox"/></td> <td></td> <td>OTHER: <u>Completion Operations</u> <input checked="" type="checkbox"/></td> <td></td> </tr> </table>		<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>		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: <input type="checkbox"/>		OTHER: <u>Completion Operations</u> <input checked="" type="checkbox"/>		9. OGRID Number 229137
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10. Pool name or Wildcat Hay Hollow; Bone Spring																										

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.

8/1/14 to 8/12/14 MIRU. Test 5 1/2" csg to 8600#. Drill cmt, FC, FS & new formation to 18988'. Circ clean.

9/13/14 Test backside to 1500#. Ran CBL. TOC @ 4386'. Set CBP @ 18890'. Test csg to 8530#. Good test. Perforate 18660-18860' (36). Injection test.

12/19/14 to 12/29/14 Perforate 9358-18560' (1116). Acdz 9358-18860' w/190092 gal 7 1/2% acid. Frac w/14,362,477# sand & 12,132,779 gal fluid. SI to frac SRO State Com #45H.

1/8/15 Began flowing back & testing.

Spud Date: 6/8/14

Rig Release Date: 7/10/14

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

SIGNATURE Stormi Davis TITLE: Regulatory Analyst DATE: 1/30/15  
 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

**For State Use Only**

APPROVED BY: SD Davis TITLE: Dist # Supervisor DATE: 2/4/15  
 Conditions of Approval (if any):