Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-015-42348
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.		STATE FEE
District IV – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			,
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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.)			Pine Springs 2 State SWD
1. Type of Well: Oil Well	Gas Well Other <u>SWD</u>		8. Well Number
2. Name of Operator COG Operating LLC			9. OGRID Number 229137
3. Address of Operator			10. Pool name or Wildcat
2208 W. Main Street, Artesia, I	√M 88210		SWD; Devonian
4. Well Location	•		
Unit Letter K: 2500 feet from the South line and 2500 feet from the West line			
Section 2	 	ange 25E	NMPM Eddy County
State Company of Table 1 (1982) and the	11. Elevation (Show whether DE		
	3592	' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			K ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		ILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	T JOB 📙
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM			
OTHER:		OTHER:	Completion Operations
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.			
6/11/15 Date of first injection. (Ord	ler SWD-1474)		
, ,	,	•	NM OIL CONSERVATION ARTESIA DISTRICT
			JUN 19 2015
			RECEIVED
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE SIGNATURE	TITLE:	Regulatory Analyst	DATE: <u>6/16/15</u>
Type or print name: Stormi Day	<u>/is</u> E-mail addres	ss: <u>sdavis@conch</u>	o.com PHONE: (575) 748-6946
For State Use Only	rido 7.	F.M.	01116) 1. balie
APPROVED BY: Conditions of Approval (if any):	TITLE U	v el egle	OON / DATE Q/CS/IS