

Submit 3 Copies to Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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

WELL API NO. <b>30-015-34250</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Mosley Canyon "32" State</b>
8. Well Number <b>1</b>
9. OGRID Number <b>229137</b>
10. Pool name or Wildcat <b>Undes, Baldrige Canyon Morrow</b>

**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 ☐ Gas Well ☐ Other ☐

2. Name of Operator  
**COG Operating LLC**

3. Address of Operator  
550 W. Texas Ave., Suite 1300 Midland, TX 79701

4. Well Location  
Unit Letter **D** : **990** feet from the **North** line and **660** feet from the **West** line  
Section **32** Township **23S** Range **25E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

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 checked="" type="checkbox"/>	
OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

11/26/05 Drilled 12-1/4" hole to 2600'. Ran 59 jts 8-5/8" 32# J55 LTC csg set @ 2600'. Cmdt 1<sup>st</sup> stage w/ 100 sx Cl H + 10% A10 + 10# Gil + 1% CaCl2 + 1/4# CF. 14.6#, Yield 1.51. Followed by 450 sx 50/50/10 Cl C + 5% salt + 5# Gil + 1/4# CF. 11.8#, Yield 2.45. Cmdt 2<sup>nd</sup> stage w/ 80 sx Cl H + 10% A10 + 10# Gil + 1% CaCl2 + 1/4# CF. 14.6#, Yield 1.51. Followed by 400 sx 50/50/10 Cl C + 5% salt + 5# Gil + 1/4# CF. 11.8#, Yield 2.45. Tail w/ 200 sx Cl C + 2% CaCl2. PD @ 9:15 AM. Circ 109 sx to pit. Cut off & weld on head & test to 1500# for 15 min. NU BOP & test to 1500 for 10 min.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Phyllis Edwards TITLE Regulatory Analyst DATE 12/21/05

Type or print name Phyllis Edwards E-mail address: pedwards@conchoresources.com Telephone No. 432-685-4340

**For State Use Only**

APPROVED BY: **DENIED** TITLE \_\_\_\_\_ DATE **DEC 30 2005**

Conditions of Approval (if any): Resubmit w/ actual WCC Time  
Casing Pressure Test Time