

Submit 1 Copy To Appropriate District

Office

District I - (575) 393-8101

1625 N. French Dr., Hobbs, NM 88201

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 July 18, 2013

NM OIL CONSERVATION

ARTESIA DISTRICT

JUL 25 2016

RECEIVED

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.	30-015-43315
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	Man State
8. Well Number	3H
9. OGRID Number	229137
10. Pool name or Wildcat	Travis; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3555' GR

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
2208 W. Main Street, Artesia, NM 88210

4. Well Location

Unit Letter P : 330 feet from the South line and 405 feet from the East line

Section 32 Township 18S Range 28E NMPM Eddy County

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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion Operations <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5/12/16 Load & test annulus to 1500#. Test good. Set CBP @ 11050'. Test csg to 8227# for 30 mins. Good test. Perforate 11000-11010' (60). Injection test.

6/21/16 to 6/24/16 Set CBP @ 10960'. Perforate 7172-10940' (936). Acdz w/81022 gal 15% acid. Frac w/5920353# sand & 5158243 gal fluid.

6/29/16 to 7/1/16 Drilled out all frac plugs & clean down to CBP @ 10960'.

7/5/16 Set 2 7/8" 6.5# J-55 tbg @ 6515' & pkr @ 6450'. Installed gas-lift system.

7/6/16 Began flowing back & testing.

Spud Date:

Rig Release Date:

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: 7/15/16
 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

For State Use Only

APPROVED BY: *Karen Sharp* TITLE: Bus Op Spec-Adv DATE: 7-27-16
 Conditions of Approval (if any):