

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
NM OIL CONSERVATION
 Energy, Minerals and Natural Resources
ARTESIA DISTRICT
APR 19 2017
OIL CONSERVATION DIVISION
RECEIVED
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 October 13, 2009

<p style="text-align: center;">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.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p> <p>2. Name of Operator COG Operating LLC</p> <p>3. Address of Operator 600 W. Illinois, Midland, TX 79701</p> <p>4. Well Location Unit Letter <u>K</u> : <u>1650</u> feet from the <u>S</u> line and <u>1650</u> feet from the <u>W</u> line Section <u>26</u> Township <u>17S</u> Range <u>28E</u> NMPM County <u>Eddy</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3655' GR</p>	<p>WELL API NO. 30-015-27619</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil & Gas Lease No. 647</p> <p>7. Lease Name or Unit Agreement Name Arco 26 A State</p> <p>8. Well Number 1</p> <p>9. OGRID Number 229137</p> <p>10. Pool name or Wildcat Artesia, Q-G-SA</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p style="text-align: center;">NOTICE OF INTENTION TO:</p> <p>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"/></p> <p>OTHER: <input type="checkbox"/></p>	<p style="text-align: center;">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input checked="" type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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.

04/05/17 MIRU plugging equipment. POH w. rods & pump. ND well head, NU BOP. POH w/ 87 jts of 2 7/8 tbg. Set 5 1/2 CIBP @ 1900'. Circulated hole w/ MLF. Spotted 25 sx class C cmt @ 1900-1800'. WOC. 04/06/17 Tagged plug @ 1679'. Spotted 25 sx class C cmt w/ 2% CACL @ 1350-1150'. WOC. Tagged plug @ 1161'. Spotted 25 sx class C cmt w/ 2% CACL @ 850-608'. WOC. Tagged plug @ 640'. Perf'd csg @ 596'. Pressured up on perfs. 04/07/17 Spotted 70 sx class C cmt @ 640 & circulated to surface. Rigged down and moved off. 04/11/17 Moved in backhoe and welder. Dug out cellar. Cut off well head. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Cut off deadmen. Cleaned location, moved off.

Spud Date:

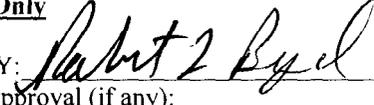
Rig Release Date:

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

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

SIGNATURE  TITLE Lead Regulatory Analyst DATE 4/13/17

Type or print name Kanicia Castillo E-mail address: kecastillo@concho.com PHONE: 432-685-4332

APPROVED BY:  TITLE COMPLIANCE OFFICER DATE 4/19/2017

Conditions of Approval (if any):