

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  
 Energy, Minerals and Natural Resources

Form C-103  
 August 1, 2011

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

WELL API NO. <b>30-015-23849</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>Perkins SWD</b>
8. Well Number 1
9. OGRID Number <b>217955</b>
10. Pool name or Wildcat <b>SWD; Bell Canyon-Cherry Canyon</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>2923 GR</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  
**600 W Illinois, Midland, TX 79701**

4. Well Location  
 Unit Letter **G** : **1980** feet from the **N** line and **1980** feet from the **E** line  
 Section **30** Township **26S** Range **29** NMPM **E** County **Eddy**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<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 checked="" 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: <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

06/21/17 MIRU Plugging equipment. Dug out cellar, ND well head, NU BOP. 06/22/17 POH w/ 85 jts of tbg. Tagged CIBP @ 2800'. Circulated hole w/ Mud laden fluid. SPotted 50 sx class C cmt @ 2800-2304'. WOC. Tagged plug @ 2343'. Perf'd csg @ 470'. 06/23/17 ND BOP, NU well head. Circulated hole w/ 20 bbls H2O, broke circulation. Sqz'd 140 sx class C cmt @ 100' & circulated to surface. Rigged down and moved off. 06/27/17 Moved in backhoe and welder. Dug out cellar & well head. Cut off deadmen. 07/10/17 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 100% subsequent Report of Well Plugging  
 which may be found at OGD Web Page under  
 Form: www.cenrd.state.nm.us/ocd.

**NM OIL CONSERVATION**  
 ARTESIA DISTRICT  
 JUL 19 2017  
 RECEIVED

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

SIGNATURE K-C TITLE Lead Regulatory Analyst DATE 7/14/17  
 Type or print name Kanicia Castillo E-mail address: KCastillo@concho.com PHONE: 432-685-4332  
**For State Use Only**  
 APPROVED BY: [Signature] TITLE COMPLIANCE OFFICER DATE 7/20/17  
 Conditions of Approval (if any):