

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
 Environmental and Natural Resources
 ARTESIA DISTRICT
 JUL 27 2017
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
 RECEIVED

Form C-103
 October 13, 2009

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.)		WELL API NO. 30-015-20551
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator COG Operating, LLC		6. State Oil & Gas Lease No. B-8095
3. Address of Operator 600 W. Illinois Ave., Midland, TX 79701		7. Lease Name or Unit Agreement Name ETZ State Unit
4. Well Location Unit Letter <u>E</u> : <u>1880</u> feet from the <u>N</u> line and <u>660</u> feet from the <u>W</u> line Section <u>16</u> Township <u>17S</u> Range <u>30E</u> NMPM County <u>Eddy</u>		8. Well Number 107
		9. OGRID Number 229137
		10. Pool name or Wildcat GRBG-Jackson, SR-Q-GRBG-SA
		11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3950

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

NOTICE OF INTENTION TO: 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"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <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.
 07/13/17 MIRU Plugging Equipment. ND well head, NU BOP. POH w/ 75 jts of tbg & packer. 07/14/17 RIH w/ tbg, tagged out @ 2490'. Set 4 1/2" CIBP @ 2032'. Circulated hole w/ mud laden fluid, Spotted 25 sx class C cmt w/ 2% CACL @ 2032-1687'. WOC. Tagged plug @ 1535'. Perf'd csg @ 1095', broke circulation, Spotted 25 sx class C cmt @ 1095-990'. WOC. 07/17/17 Tagged plug @ 952'. (Notified Bob Byrd w/ OCD). Perf'd csg @ 580'. Sqz'd 150 sx class C cmt @ 580'. Cmt stopped circulating. Spotted 16 sx class C cmt, no circulation. WOC. 07/18/17 Tagged plug @ 35'. Spotted 20 sx class C cmt @ 35 & circulated to surface. Riggged down and moved off. 07/19/17 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:

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

SIGNATURE Kanicie Castillo TITLE Lead Regulatory Analyst DATE 7/24/17
 Type or print name Kanicie Castillo E-mail address: KCastillo@concho.com PHONE: 432-685-4332
For State Use Only
 APPROVED BY: Robert J Byrd TITLE COMPLIANCE OFFICER DATE 7/27/17
 Conditions of Approval (if any):