

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

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

Form C-103
Revised July 18, 2013

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 30-015-27882
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5 Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2 Name of Operator COG Operating LLC		6 State Oil & Gas Lease No NMNM016786
3 Address of Operator One Concho Center, 600 W Illinois Avenue, Midland, TX 79701		7 Lease Name or Unit Agreement Name Saber Federal
4 Well Location Unit Letter <u>B</u> <u>720</u> feet from the <u>North</u> line and <u>2005</u> feet from the <u>East</u> line Section <u>11</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>Eddy</u>		8 Well Number 1
11 Elevation (Show whether DR, RKB, RT, GR, etc) 3641'		9 OGRID Number 229137
		10 Pool name or Wildcat SWD Upper Penn

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 <input type="checkbox"/>	MIT <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

4/5/2018 CREW TO LOCATION, PJSM, JSA, RD WSU, PUMP OUT PUMP OUT PLUG @ 3900 PSI, FLOWBACK 200 BBLS FROM WELL TO CLEAN UP, RUN MIT TEST, PRESSURE 560 PSI, RECORD ON CHART RECORDER, OCD WAS ON LOCATION, OCD REP TOOK CHART, ACIDIZE WELL WITH 4500 GALS 15% HCL ACID, 2 5 BPM @ 1250 PSI, FLUSH WITH 70 BBLS PRODUCED WATER, 2 5 BPM @ 750 PSI, ISIP VAC, TOTP

NM OIL CONSERVATION
ARTESIA DISTRICT

APR 16 2018

RECEIVED

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 Dana King TITLE Permit Specialist II DATE 4/13/18

Type or print name Dana King E-mail address dking@concho.com PHONE

For State Use Only

APPROVED BY Dana King TITLE COMPLIANCE OFFICER DATE 4/17/18
Conditions of Approval (if any)