

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

**RECEIVED** State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

**NOV 05 2018** CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
**DISTRICT II-ARTESIA**

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. <b>30-015-21260</b>
1. Type of Well: Oil Well <input checked="" 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 <b>COG Operating, LLC</b>		6. State Oil & Gas Lease No. <b>B-2071</b>
3. Address of Operator <b>600 W. Illinois Ave, Midland, TX 79701</b>		7. Lease Name or Unit Agreement Name <b>NG Phillips State</b>
4. Well Location Unit Letter <u>E</u> : <u>2310</u> feet from the <u>N</u> line and <u>330</u> feet from the <u>W</u> line Section <u>27</u> Township <u>17S</u> Range <u>28E</u> NMPM County <u>Eddy</u>		8. Well Number <b>#11</b>
		9. OGRID Number <b>229137</b>
		10. Pool name or Wildcat <b>E. Empire Yates S R</b>
		11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3672' GR</b>

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

<b>NOTICE OF INTENTION TO:</b> 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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> 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"/>	
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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.

10/19/18 MIRU Plugging equipment. 10/22/18 POH w/ 29 - 3/4" rods, 4 1/2" casing parted at surface. RU tubing tongs. POH w/ 25 jts of tubing. Set 4 1/2" CIBP @ 710'. 10/23/18 Circulated hole w/ MLF. Spotted 25 sx class C cmt w/ 2% CACL @ 710-410'. WOC. Tagged plug @ 408'. Perf'd casing @ 113'. Set packer @ 10', could not load hole. Squeezed 3 sx LCM into perfs. Squeezed 30 sx class C cmt w/ 2% CACL @ 113' & displaced to 30'. WOC. Attempted to pressure test squeeze, would not test. Re-Squeezed 3 sx Tiger Bullets & LCM followed by 30 sx class C cmt w/ 2% CACL @ 113' & displaced to 30'. WOC. 10/24/18 No Tag. Pump'd 3 bbls H2O w/ 2sx Tiger Bullets down hole. Waited for 1 hour. Squeezed 30 sx class C cmt w/ 2% CACL @ 113' & displaced to 30'. WOC. Attempted to pump into perfs, could not. Tagged plug @ 65'. Spotted 5 sx class C cmt @ 65' & circulated to surface. Rigged down & moved off. 10/25/18 Moved in backhoe and welder. Dug out cellar. Cut off well head. Verified cement to surface. 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 Ornella Aaron TITLE Oper Engr Tech DATE 11-2-18

Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_

**For State Use Only**

APPROVED BY: [Signature] TITLE STAR Mgr DATE 11-5-18

Conditions of Approval (if any):

**ENTERED**