

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
 Revised July 18, 2013

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

WELL API NO. 30-015-36482
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 Kool Aid State
8. Well Number 5
9. OGRID Number 229137
10. Pool name or Wildcat Empire; Glorieta -Yeso

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 SWD

2. Name of Operator
COG Operating LLC

3. Address of Operator
One Concho Center, 600 W. Illinois Avenue, Midland, TX 79701

4. Well Location
 Unit Letter A : 990 feet from the North line and 990 feet from the East line
 Section 24 Township 17S Range 28E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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: 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.

1/14/2019 Legendary Pump Truck, Safety Meeting, JSA, Csg is loaded. RU Steel Lines, RU Chart Recorder, Tested Csg @ 4500 PSI, recorded Data for 30 min. Well Supervisor and Pump Truck Operator witnessed Csg Integrity Test, Bled Down Pressure, RD Steel Lines, SI Csg, Notified Engineer, RDMO Pump Truck. Well is ready for Completion.

Chart Attached

RECEIVED

JAN 18 2019

Spud Date: Rig Release Date: DISTRICT II-ARTESIA O.C.D

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 1/17/2019

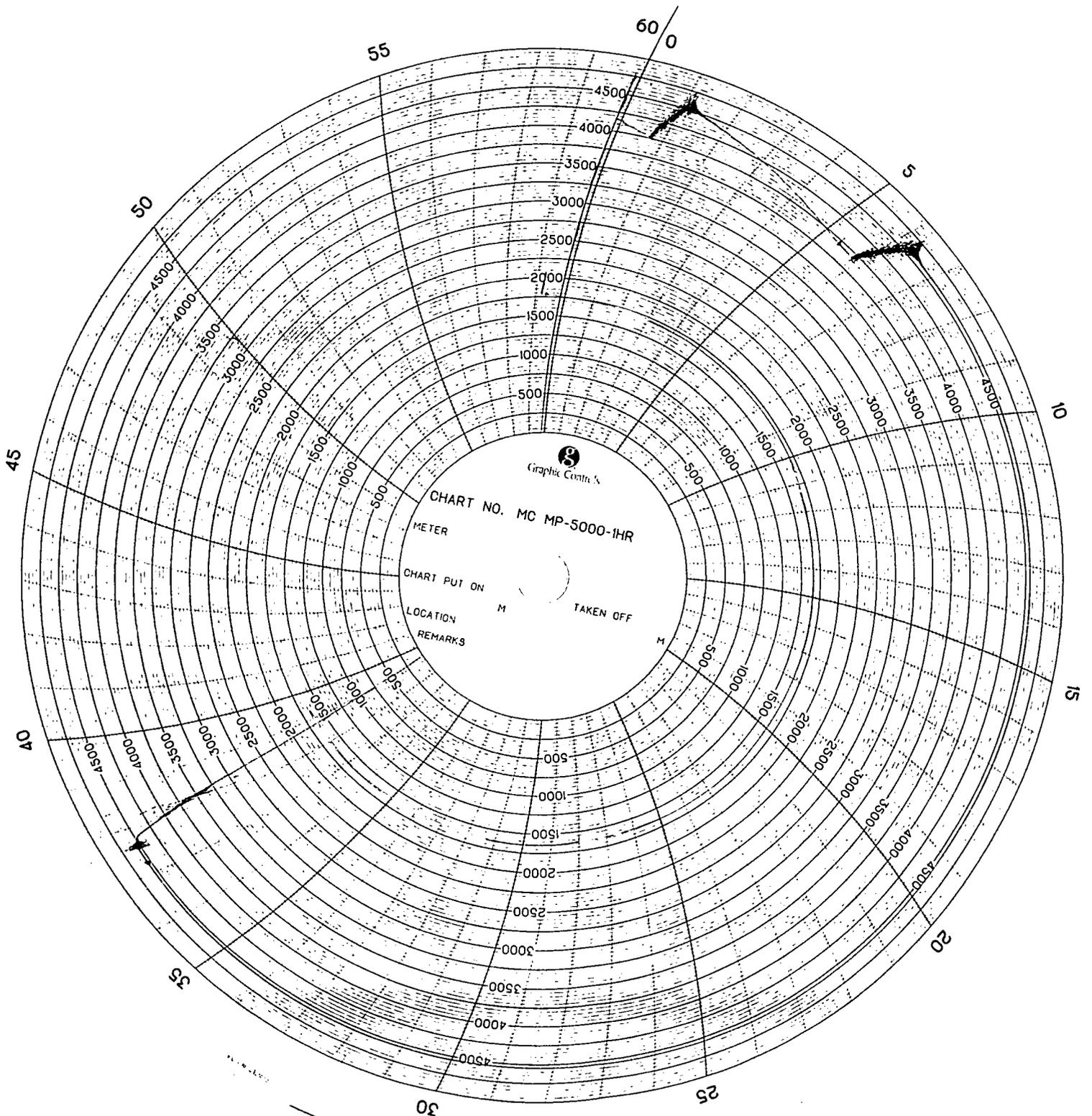
Type or print name Dana King E-mail address: dking@concho.com PHONE: (432) 818-2267

For State Use Only

APPROVED BY: [Signature] TITLE Staff mg. DATE 1/18/19
 Conditions of Approval (if any):

COG Operating LLC
OGRID No. 229137
Kool Aid State #5
API #30-015-36482

Please see Back of Chart
for Signature and Date





James W. [Signature]
1/14/2019
Research Center

Kool H.I.D. Slide #5
Casing Integrity Test