

Submit 3 Copies to Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-015-34872
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 IMPERIAL STATE
8. Well Number 6
9. OGRID Number 229137
10. Pool name or Wildcat LOCO HILLS; PADDOCK 96718

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator COG Operating LLC	
3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, TX 79701	
4. Well Location Unit Letter J : 1650' feet from the South line and 2310' feet from the East line Section 16 Township 17S Range 30E NMPM County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3677' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input checked="" type="checkbox"/>	
Pit type DRILLING Depth to Groundwater 150' Distance from nearest fresh water well 1000' Distance from nearest surface water 1000'	
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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"/>	
OTHER: <input type="checkbox"/>		OTHER: Completion <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1-24-07 Perf Yeso w/ 2 SPF @ 5587' - 5762.5'. 50 holes.
1-25-07 Acidize w/ 1400 gals acid.
1-26-07 Frac w/ 95,428' gals gel, 8000# LiteProp, & 90,660# 16/30 sand.
1-29-07 Perf Yeso w/ 2 SPF @ 5092' - 5431'. 78 holes. Acidize w/ 2500 gals acid.
1-31-07 Frac w/ 41,395 gals 30# gel, 48,847 gals 40# gel, 8000# LiteProp, & 90,540# 16/30 sand.
2-1-07 Perf Yeso 4783.5' - 5003'. 60 holes. Acidize w/ 2500 gals acid.
2-2-07 Frac w/ 32,500 gals 30# gel, 57,628 gals 40# gel, 8000# LiteProp, & 91,780# 16/30 sand.
2-5-07 RIH w/ 181 jts 2-7/8" J55 tbg, SN @ 5790'. RIH w/ 2-1/2" x 2" x 24' pump.
2-6-07 Turn to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Phyllis Edwards TITLE Regulatory Analyst DATE 2-20-07

Type or print name **Phyllis Edwards** E-mail address: **pedwards@conchoresources.com** Telephone No. **432-685-4340**
For State Use Only

APPROVED BY: **FOR RECORDS ONLY** TITLE _____ DATE **FEB 26 2007**
Conditions of Approval (if any): _____