

2. 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 Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-03171
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-255
7. Lease Name or Unit Agreement Name GJ West Coop Unit
8. Well Number g
9. OGRID Number 229137
10. Pool name or Wildcat Grayburg Jackson; 7RVS-QN-G-SA/Empire, Yeso, East

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

2. Name of Operator
COG Operating LLC

3. Address of Operator
550 W Texas, Suite 1300, Midland, TX 79701

4. Well Location
 Unit Letter J 2310 feet from the South line and 1650 feet from the East line
 Section 28 Township 17S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3562' GR

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bb1s; 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: <u>Re-Completion</u> <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.

5-23-94 RIH w/ 6 1/8" bit. Start drilling.
 6-06-94 TD @ 4646'.
 6-08-94 Ran 98 joints 4 1/2" 11.60# J-55 (3074.49') & 49 jts 4 1/2" 10.55# J-55 (1565.51'), set @ 4640', Cemented w/275 sx. Premium Plus 2% CC, 4/10% Halad 322, bump plug, circ 36sx.
 6-13-94 Perforated from 4109-4432' 32 holes.
 6-14-94 Acidized 4109-4432' w/2000 gals 15% NE.
 6-15-94 Re-acidized 4109-4432' w/54,000 gals 40# gel, 32,000 gal 20% NE, 5,000 gals 15% NE.
 6-16-94 Perforated from 3082-4031' 22 holes. Acidized 4029'-4031' 3 holes w/500 gals 15% NE.
 6-17-94 Acidized 3082'-3688' 19 holes w/1800 gals 10% NE.
 6-18-94 Re-acidized 3082'-3688' w/54,000 gals 40# gel, 32,000 gals 20% NE, 5000 gals 15% NE.
 6-20-94 RIH w/142 joints 2 7/8 J-55 tubing SN @ 4450', RIH w/2 1/2x2x22' pump.

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 NMOC guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Diane Kuykendall TITLE Production Analyst DATE 9/1/06

Type or print name Diane Kuykendall E-mail address: dkuykendall@conchoresources.com Telephone No. (432)683-7443

For State Use Only **FOR RECORDS ONLY**

APPROVED BY: _____ TITLE _____ DATE SEP 11 2006
 Conditions of Approval (if any): _____