Submit 3 Copies 10 Appropriate District Office	State of New Mexico			Form C-103		
<u>District I</u> 1.625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			May 27, 2004 WELL API NO.		
District II	OIL CONSERVATION DIVISION			30-015-34979		
1301 W Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.			5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		1505	STATE		FEE
District IV 1220 S. St. Francis Dr , Santa Fe, NM	Santa 1 C, TVIVI 67505			6. State Oil & G	as Lease I	No.
87505 SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name	or Unit As	reement Name
(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				R J Unit		
PROPOSALS) 1. Type of Well: Oil Well 🔯	Gas Well Other			8. Well Number 142		
2. Name of Operator	JUN 0 6 2008			9. OGRID Number		
C	COG Operating LLC OCO-ARTESIA				229137	
3. Address of Operator 550 W. Texas Ave., Sui	· · · · · · · · · · · · · · · · · · ·			10. Pool name or Wildcat Grayburg Jackson SR Q G SA		
<u>, </u>	TE 1200 M	iuianu,	17 19101	Grayburg .		SK Q G SA
4. Well Location Unit Letter K :	1753' feet from the \$	South	line and 2188 '	feet from th	ne We	st line
Section 27		17S	Range 29E	NMPM		County EDDY
	11. Elevation (Show whe					county ===:
3528' GR						
Pit or Below-grade Tank Application						4000
Pit type DRILLING Depth to Grou		m nearest	fresh water well 1000'	-	irest surface	e water1000
Pit Liner Thickness: 12 mil	Below-Grade Tank: Volume		bbls; Construction			
12. Check	Appropriate Box to Ind	licate Na	ature of Notice, R	Report or Other	r Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK						NG CASING 🔲
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING OPNS. P AND A					A 🗆
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	JOB 📙		
OTHER: Drill with close	d loop system	\boxtimes	OTHER:			
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.						
or recompletion.						
COG Operating LLC respectfully requests permission to drill this well with a closed loop system.						
•						
				11 11 0		
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 LAGGLIC	Lwards	Prue_	Regulatory Analys	st	_DATE_	6-4-08
Type or print name Phyllis Edwards E-mail address: pedwards@conchoresources.com Telephone No. 432-685-4340						
For State Use Only						
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APPROVED BY: Conditions of Approval (if any):	T	TTLE			DATE	control of the State of the Sta
Conditions of Approval (II any):			A			