Submit 3 Copies 10 Appropriate District Office	State of New Mexico		MAR 7 2 2009		Form C-103	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		al Resources	WELL API NO.		May 27, 2004
District II	OIL CONSERVATION DIVISION				015-3647	8 (11)
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.			5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				∑ FE	
District IV	Santa Fe	e, INIVI 8 /	303	6. State Oil & Ga	is Lease N	Э.
1220 S. St. Francis Dr., Santa Fe, NM 87505						
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name of	r Unit Agr	eement 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			Kool Aid State			
PROPOSALS.)			8. Well Number 1			
1. Type of Well: Oil Well						
2. Name of Operator				9. OGRID Numb		
COG Operating LLC  3. Address of Operator				10. Pool name or	229137 Wildcat	96210
550 W. Texas Ave., Sui	ite 1300 f	Midland, 1	TX 79701	EMPIRE;		
4. Well Location	***************************************					
Unit Letter <b>H</b>	: <b>2310</b> feet from the	North	line and 990	feet from the	East	line
Section 24	Township 17		nge 28E	NMPM	Coun	
Section 2.	11. Elevation (Show wh		<u> </u>		Coun	.,
	11, 21, 31, 11, 11, 11, 11, 11, 11, 11, 11, 1	3689'	·			
Pit or Below-grade Tank Application	or Closure 🗵			Financia		
Pit typeDRILLINGDepth to Grou	undwater_ <u>110'</u> Distance f	rom nearest	fresh water well <u>100</u>	<u>0'</u> Distance from near	rest surface v	vater <u>1000</u>
Pit Liner Thickness: 12 mil	Below-Grade Tank: Volume	<u>e</u>	bbls; Constructio	n Material		
12. Check	Appropriate Box to Ir	idicate Na	ature of Notice.	Report or Other	Data	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
				SEQUENT RE		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR						G CASING 🔲
			LLING OPNS.	P AND A		
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	T JOB		
OTHER:			⊠OTHER:	Completio	n	•
13. Describe proposed or com	pleted operations. (Clearly	y state all p	. —			ng estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion						
or recompletion.						
02 10 00 Port @ 4000 5100	w/ 2 SDE 48 holes Ar	sidizo w/ 2	500 gale acid. Era	ac w/ 113 000 gal	Slur Stm	gel 140 900#
02-19-09 Perf @ 4900 – 5100, w/ 2 SPF, 48 holes. Acidize w/ 2500 gals acid. Frac w/ 113,000 gal Slvr Stm gel, 140,900# White, & 33,200# Siberprop. CBP @ 4860. Perf @ 4630 – 4830, w/ 2 SPF, 36 holes. Acidize w/ 2500 gals acid.						
Frac w/ 115,000 gal Sivr Stm gel, 143,200# White, & 36,200# Siberprop. CBP @ 4510. Perf @ 4280 – 4480 w/						
2 SPF, 36 holes. Acidize w/ 3400 gals acid. Frac w/ 110,000 gal Slvr Stm gel, 131,400# White, & 32,900#						
Siberprop.						
02-18-09 Drill out plugs @ 4510 & 4860. PBTD 5303.						
02-19-09 RIH w/ 136 jts 2-7/8" J55 tbg, SN @ 4178'.						
02-22-09 RIH w/ 20' rod pump.	iurn to production.					
						•
I hereby certify that the information	above is true and comple	ete to the be	st of my knowledg	e and belief. I furth	er certify th	at any pit or below-
grade tank has been/will he constructed o	r closed according to NMOCD	guidelines	], a general permit [_]	or an (attached) altern	native OCD-	approved plan ∐.
SIGNATURE Therete's C	D- Clevaid	TENTLE )	Regulatory Ana	alvst	DATE	03-11-09
Sisterior may cost	4 - week		. togulatory All		~****	
Type or print name Phyllis A. E	dwards E-mail address:	pedward	s@conchoresou	urces.com Telej	phone No.	432-685-4340
For State Use Only	/					
APPROVED BY:	la can Va	TITLE	Goologist		DATE	3/13ho
Conditions of Approval (if any):	Mary Mary		The state of the s			7