

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. 30-015-37402
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 Yucca State
8. Well Number 8
9. OGRID Number 229137
10. Pool name or Wildcat FREN; YESO, EAST (26770)

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL IN 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 Ave., Suite 1300 Midland, TX 79701

4. Well Location
Unit Letter **K** **1650** feet from the **South** line and **1650** feet from the **West** line
Section **16** Township **17S** Range **31E** NMPM County **EDDY**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3775' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

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

Pit Liner Thickness: _____ 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>
	P AND A <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.

5/27/10 Test 5-1/2 csg 3,500psi, ok.
5/28/10 Perf Lower Blinbry @ 6050-6250 w/ 1 SPF, 26 holes.
6/1/10 Acidize w/3,500 gals acid. Frac w/113,664 gals gel, 146,696# 20/40 Ottawa sand, 33,964# 16/30 Super LC sand. Set comp plug @ 6010. Perf Middle Blinbry @ 5780-5980 w/1 SPF, 26 holes. Acidize w/3,500 gals acid. Frac w/ 116,695 gals gel, 145,795# 20/40 Ottawa sand, 36,208# 16/30 Super LC sand. Set comp plug @ 5740. Perf Upper Blinbry @ 5510-5710 w/ 1 SPF, 26 holes. Acidize w/3,500 gals acid. Frac w/ 116,713 gals gel, 146,310# 20/40 Ottawa sand, 34,535# 16/30 Super LC sand. Set comp plug @ 5090. Perf Paddock @ 4870-5062 w/1 SPF, 26 holes. Acidize w/ 3,000 gals acid Frac w/ 103,455 gals gel, 113,194# 20/40 Ottawa sand, 22,774# 16/30 Super LC sand.
6/4/10 Drill out plugs Clean out to PBTD 6563'
6/7/10 RIH w/190jts 2-7/8" 6.5# J55 tbg, SN @ 6044'
6/8/10 RIH w/ 2-1/2"x2-1/4"x24" pump. Hang on well.

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 C. Jackson TITLE Agent for COG DATE 7/19/10

Type or print name Chasity Jackson E-mail address cjackson@conchoresources.com Telephone No. 432-686-3087
For State Use Only

APPROVED BY David Gray TITLE Field Supv. DATE 7-26-10
Conditions of Approval (if any):