Submit 3 Copies To Appropriate District	State of New Me	exico		Form C-103
Office District I	Energy, Minerals and Natural Resources			June 19, 2008
1625 N. French Dr., Hobbs, NM 88240	Enough, minorale and realization and		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-374	
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE □	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement 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			CDO State Unit	
PROPOSALS.)			SRO State Unit 8. Well Number 015H	
1. Type of Well: Oil Well Gas Well Other			9. OGRID Number	
2. Name of Operator COG Operating			14049 22913.7	
3. Address of Operator			10. Pool name or Wildcat	
2208 W. Main Artesia, NM 88210			Wildcat; Bone Spring	
4. Well Location				
Unit LetterD660 feet from theNorth line and330_feet from theWestline				
Section 17 Township 26S Range 28E				MPM County Eddy
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2995' GR			The second second
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				☐ ALTERING CASING ☐
TEMPORARILY ABANDON			ILLING OPNS	. □ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	IT JOB	
DOWNHOLE COMMINGLE				
OTHER: Name Chang	1e	OTHER:		П
13. Describe proposed or completed operations. (Clearly state all pertinent details, and				
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
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JAN 10 Zun				
COG Operating respectfully requests approval for the following many change: 37 37 37 37 37 37 37 37 37 37 37 37 37				
T	PROPERTODE -	32 3	المناصرين	
To: SRO State Unit #015H	OOL COL	6 5 5		
Effective: 12/3/2009	CEF DATE	0-11		
	EI NO.			
Spud Date:	Rig Release Da	l		
Space Date.				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Kanda Kara TITLE Land Department DATE 1/7/2011				
Type or print nameKanda Robinson_ E-mail address: reception@marbob.com_PHONE: 575-748-3303_For State Use Only				
APPROVED BY:				
APPROVED BY: DATE 1/10/201 DATE 1/10/201				