

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.<br><b>30-015-36251</b>                                                                 |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br><b>TEX-MACK</b>                                             |
| 8. Well Number <b>205</b>                                                                           |
| 9. OGRID Number<br><b>229137</b>                                                                    |
| 10. Pool name or Wildcat<br><b>FREN; GLORIETA-YESO</b>                                              |

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 Ave., Suite 1300 Midland, TX 79701**

4. Well Location  
Unit Letter L : 2310 feet from the South line and 330 feet from the West line  
Section 2 Township 17S Range 31E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3976' 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Completion ☒

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.

11/4/10 Test csg to 3500#.

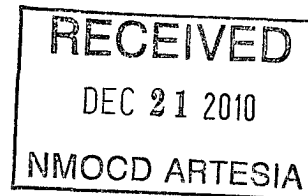
11/10/10 Perf Lower Blinbry @ 6280-6480 w/ 1 SPF, 26 holes.

11/11/10 Acidize w/3,500 gals acid. Frac w/108,919 gals gel, 142,469# 16/30 Ottawa sand, 27,494# 16/30 SLC. Set Plug @ 6240. Perf Middle Blinbry @ 6010-6210 w/1 SPF, 26 holes. Acidize w/3,500 gals acid. Frac w/115,837 gals gel, 153,338# 16/30 Ottawa Sand, 29,582# 16/30 SLC. Set comp plug @ 5970. Perf Upper Blinbry @ 5740-5940 w/ 1 SPF, 26 holes. Acidize w/3,500 gals acid. Frac w/ 111,038 gals gel, 148,478# 16/30 Ottawa sand, 30,963# 16/30 SLC. Set Plug @ 5520. Perf Paddock @ 5190-5480 w/1 SPF, 26 holes. Acidize w/3,000 gals acid. Frac w/92,915 gals gel, 190,613# 16/30 Ottawa sand, 16,698# 16/30 SLC.

11/17/10 Drill out plugs. Clean out to PBTD 6646.

11/18/10 RIH w/197jts 2-7/8" 6.5# J55 tbg, SN @ 6256.

11/19/10 RIH w/ 2-1/2"x2-1/4"x24" THC 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 Regulatory Analyst DATE 12/15/10

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 Supervisor DATE 12-21-10

Conditions of Approval (if any):

COH