

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103

May 27, 2004

WELL API NO.

30-025-36871

Indicate Type of Lease

STATE ☒FEE ☐

State Oil & Gas Lease No.

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

7. Lease Name or Unit Agreement Name
Red Raider State

8. Well Number 001

9. OGRID Number

299137

10. Pool name or Wildcat
Wildcat Morrow

Well Location

Unit Letter K : 1650 feet from the South line and 1980 feet from the West line
Section 19 Township 20S Range 36E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3643 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:

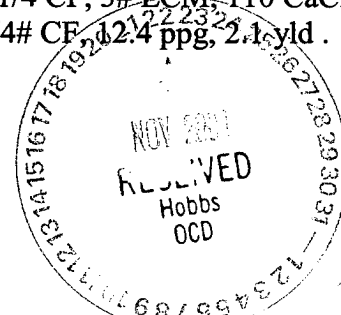
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐OTHER: ☐

SUBSEQUENT REPORT OF:

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

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.

11/15/04 Drill 12-1/4" hole to 5300'. Ran 32 jts 9-5/8" 40# HCK-55 LT&C csg and 92 jts 9-5/8" 40# J-55 LT&C csg. Csg set @ 5300'. Lead: 910 sx 50/50 Poz C+ 5% salt, 1/4 CF, 3# LCM, 110 CaCl, 11.8 ppg, 2.45 yld. Second Lead: 310 sx 35/65, 6% gel, 5% salt, 1/4# CF, 12.4 ppg, 2.1 yld. Tail: 200 sx C + 1% Cacl2, 14.8 ppg, 1.34 yld. Cut off & NU.



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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Diane Kuykendall TITLE Regulatory Analyst DATE 11/19/04Type or print name Diane Kuykendall E-mail address: dkuykendall@conchoresources.com Telephone No. 432-685-4372

For State Use Only

APPROVED BY: Gary W. Wink TITLE _____ DATE NOV 24 2004

Conditions of Approval (if any):

OCD FIELD REPRESENTATIVE / STAFF MANAGER