

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

RECEIVED
CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

HOBBSSUD

WELL API NO. 30-025-20959
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 New Mexico CR State
8. Well Number 3
9. OGRID Number 229137
10. Pool name or Wildcat SWD; Delaware 96100

SUNDY 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> SWD	
2. Name of Operator COG Operating LLC	
3. Address of Operator 550 W. Texas Ave., Suite 100 Midland, TX 79701	
4. Well Location Unit Letter L : 1980 feet from the South line and 660 feet from the West line Section 32 Township 19S Range 32E NMPM County Eddy	
11. Elevation (Show whether: DR, RKB, RT, GR, etc.) 3529 GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING 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.

- MIRU WSU
- Unset packer and POOH w/ Tubing and packer.
- Found hole in On/Off tool on packer.
- PU new On/Off tool and GIH, set packer @ 4514', circ pkr fluid
- Perform MIT test, passed test.
- RDMO

Per Underground Injection Control Program Manual
11.6 C Packer shall be set within or less than 100 feet of the uppermost injection perfs or open hole.

Condition of Approval: notify

OCD Hobbs office 24 hours

prior of running MIT Test & Chart

Spud Date:

Prior to the beginning of operations

Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE K. C. TITLE Lead Regulatory Analyst DATE 11/08/11

Type or print name Kanicia Castillo E-mail address: kcastillo@concho.com PHONE: 432-685-4332

For State Use Only

APPROVED BY: [Signature] TITLE STAFF DATE 11-9-2011
Conditions of Approval (if any):

NOV 09 2011