| Submit 3 Copies 10 Appropriate District Office District I Energy, Minerals and Na | | Form C-103 May 27, 2004 |
|--|---|---|
| 1625 N. French Dr., Hobbs, NM 88240 District II | | WELL API NO. 30-025-36903 |
| 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION | | 5. Indicate Type of Lease |
| District III 1220 South St. Ft 1000 Rio Brazos Rd., Aztec, NM 87410 | | STATE STEE |
| District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | 6. 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 | | 7. Lease Name or Unit Agreement Name Bagley 16 State |
| PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other DI | RY | 8. Well Number 1 |
| 2. Name of Operator | XI | 9. OGRID Number |
| COG Operating LLC 3. Address of Operator | | 229137 10. Pool name or Wildcat |
| 550 W. Texas Ave., Suite 1300 Midland, TX 79701 | | Permo Penn, North Bagley 3820 |
| 4. Well Location | | |
| Unit Letter <u>D</u> : 660 feet from the <u>North</u> line and 810 feet from the <u>West</u> line | | |
| Section 16 Township 11S | Range 33E | NMPM Lea County |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4920 GR | | |
| Pit type open Depth to Groundwater >50' Distance from nearest fresh water well >1000' Distance from nearest surface water >1000' | | |
| District This bross 12 P. C. L. W. L. V. L. | | |
| Dus, Constitution vialet iai Synthetic | | |
| 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 WORK ALTERING CASING | | |
| TEMPORARILY ABANDON | COMMENCE DRIL | |
| PULL OR ALTER CASING MULTIPLE COMPL | CASING/CEMENT | JOB [|
| OTHER: | OTHER: Set intern | mediate casing |
| Describe proposed or completed operations. (Clearly state a of starting any proposed work). SEE RULE 1103. For Multi or recompletion. | ll pertinent details, and | give pertinent dates, including estimated date |
| COG Operating LLC plans to plug this well as follows: | THE OIL CONS | ERVATION DIVISION MUST |
| Plug #1: 25 sx Cl H plug 11,050' TD | | 24 HOURS PRIOR TO THE |
| Plug #2: 25 sx Cl H plug 9,540' – 9,440' | | PLUGGING OPERATIONS. |
| Plug #3: 25 sx Cl H plug 7,350' - 7,250' | | AUD LOS |
| Plug #4: 25 sx Cl C plug 5,156' – 5,056' | | Received S |
| Plug #5: 25 sx Cl C plug 3,879' - 3,779' - WOC & tag Plug #6: 25 sx Cl C plug 1,770' - 1670' | | \2 \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ |
| Plug #6: 25 sx Cl C plug 1,770' - 1670' Plug #7: 25 sx Cl C plug 430' - 330' - WOC & tag | | \0223 \ \0233 \ \0233 |
| Surface: 60 sx Cl C plug | | 2324252623 |
| | | |
| Gary Wink gave verbal approval on the above plugging procedure at | 10:15 AM MDT 8/1/05 | |
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| I hereby certify that the information above is true and complete to the | best of my knowledge | and belief. I further cartify that any pit or below. |
| I hereby certify that the information above is true and complete to the grade tank has been/will be constructed or closed according to NMOCD guideline | best of my knowledge s □, a general permit □ o | and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan . |
| 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- or an (attached) alternative OCD-approved plan . |
| I hereby certify that the information above is true and complete to the grade tank has been/will be constructed or closed according to NMOCD guideline SIGNATURE SIGNATURE August Augu | best of my knowledge s □, a general permit □ o Regulatory Analys | and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan . t |
| I hereby certify that the information above is true and complete to the grade tank has been/will be constructed or closed according to NMOCD guideline SIGNATURE Type or print name Phyllis Edwards E-mail address: | best of my knowledge s , a general permit o Regulatory Analys pedwards@conchore. | and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan DATE 8-2-05 sources.com Telephone No. 432-685-4340 AUG 1 1 200 |
| I hereby certify that the information above is true and complete to the grade tank has been/will be constructed or closed according to NMOCD guideline SIGNATURE Type or print name Phyllis Edwards E-mail address: | best of my knowledge s , a general permit o Regulatory Analys pedwards@conchore. | and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan . t |