

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Avenue, Artesia, NM 88210  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy Minerals and Natural Resources  
Department  
Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-144 CLEZ  
July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

SEP 11 2013

RECEIVED  
Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action:  Permit  Closure

Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

1. Operator: COG Operating LLC OGRID #: 229137  
Address: 600 West Illinois Ave, Midland, TX 79701  
Facility or well name: Petrus D #10  
API Number: 30-025-40744 OCD Permit Number: PI-05155  
U/L or Qtr/Qtr F Section 11 Township 17S Range 33E County: Lea  
Center of Proposed Design: Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ NAD:  1927  1983  
Surface Owner:  Federal  State  Private  Tribal Trust or Indian Allotment

FOR RECORD ONLY

2.  Closed-loop System: Subsection H of 19.15.17.11 NMAC  
Operation:  Drilling a new well  Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)  P&A  
 Above Ground Steel Tanks or  Haul-off Bins

3. Signs: Subsection C of 19.15.17.11 NMAC  
 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers  
 Signed in compliance with 19.15.3.103 NMAC

4. Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC  
Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.  
 Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC  
 Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC  
 Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC  
 Previously Approved Design (attach copy of design) API Number: \_\_\_\_\_  
 Previously Approved Operating and Maintenance Plan API Number: \_\_\_\_\_

5. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)  
Instructions: Please identify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.  
Disposal Facility Name: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_  
Disposal Facility Name: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_  
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?  
 Yes (If yes, please provide the information below)  No  
Required for impacted areas which will not be used for future service and operations:  
 Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC  
 Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC  
 Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

6. Operator Application Certification:  
I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.  
Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
e-mail address: \_\_\_\_\_ Telephone: \_\_\_\_\_

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AM.

7. **OCD Approval:**  Permit Application (including closure plan)  Closure Plan (only)

OCD Representative Signature: \_\_\_\_\_ Approval Date: \_\_\_\_\_

Title: \_\_\_\_\_ OCD Permit Number: **FOR RECORD ONLY**

8. **Closure Report (required within 60 days of closure completion):** Subsection K of 19.15.17.13 NMAC  
*Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.*

Closure Completion Date: 2/18/13

9. **Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:**  
*Instructions: Please identify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.*

Disposal Facility Name: CRI Disposal Facility Permit Number: R1966  
Disposal Facility Name: GM INC Disposal Facility Permit Number: 711-019-001

Were the closed-loop system operations and associated activities performed on or in areas that *will not* be used for future service and operations?  
 Yes (If yes, please demonstrate compliance to the items below)  No

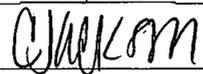
*Required for impacted areas which will not be used for future service and operations:*

- Site Reclamation (Photo Documentation)
- Soil Backfilling and Cover Installation
- Re-vegetation Application Rates and Seeding Technique

10. **Operator Closure Certification:**

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.

Name (Print): Chasity Jackson Title: Regulatory Analyst

Signature:  Date: 9/7/13

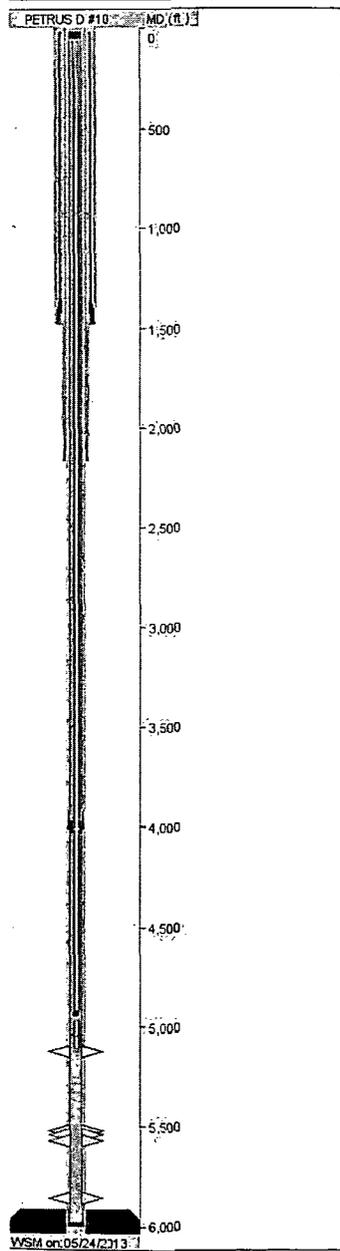
e-mail address: cjackson@concho.com Telephone: 432-686-3087

ID: 30-025-40744

Well Name: PETRUS D #10

Event#: 4

Report Dates: 05/24/2013



### PIPE SPECIFICATION

STRING NAME	SECTION NAME	JOINT COUNT	START DEPTH	END DEPTH	LENGTH	OD SIZE	ID SIZE	WT GRDNT	GRD	CONN
SURFACE	FLOAT SHOE		1471.90	1473.00	1.10					STC
SURFACE	CASING	1	1429.70	1471.90	42.20	13.38	12.62	54.5	J-55	STC
SURFACE	INSERT FLOAT		1429.70	1429.70	0.00					STC
SURFACE	CASING	34	21.02	1429.70	1431.83	13.38	12.62	54.5	J-55	STC
PRODUCTION	GUIDE SHOE		6032.50	6034.00	1.50					LTC
PRODUCTION	CASING	1	5991.40	6032.50	41.10	55.00	4.89	17.0	J-55	LTC
PRODUCTION	FLOAT COLLAR		5989.90	5991.40	1.50					LTC
PRODUCTION	CASING	48	4017.01	5989.90	1972.89	5.50	4.89	17.0	J-55	LTC
PRODUCTION	MARKER JOINT	1	4004.24	4017.01	12.77	5.50	4.89	17.0	J-55	LTC
PRODUCTION	CASING	97	16.76	4004.24	3987.48	5.50	4.89	17.0	J-55	LTC
PRODUCTION	LANDING JOINT		-2.78	16.76	19.54	5.50	4.89	17.0	J-55	LTC
PRODUCTION				-2.78	-2.78					
TUBING	BULL PLUG		5282.35	5282.73	0.38	2.88				
TUBING	MUD ANCHOR	1	5121.23	5282.35	161.12	2.88	2.50	6.7	J55	
TUBING	DESANDER		5102.13	5121.23	19.10	2.88				
TUBING	SEAT NIPPLE		5100.93	5102.13	1.20	2.88				
TUBING	TUBING	1	5036.68	5100.93	64.25	2.88	2.50	6.7	J55	
TUBING	TUBING ANCHOR		5033.68	5036.68	3.00	5.50				
TUBING	TUBING	1	4969.43	5033.68	64.25	2.88	2.50	6.7	J55	
TUBING	MARKER SUB		4967.43	4969.43	2.00	2.88				
TUBING	TUBING	1	0.00	4967.43	4967.43	2.88	2.50	6.7	J55	
TUBING				0.00	0.00					
INTERMEDIATE	FLOAT SHOE		2160.90	2162.00	1.10					LTC
INTERMEDIATE	CASING	1	2116.72	2160.90	44.18	8.63	7.92	32.0	J-55	LTC
INTERMEDIATE	FLOAT COLLAR		2115.27	2116.72	1.45					LTC
INTERMEDIATE	CASING	48	-2.75	2115.27	2118.02	8.63	7.92	32.0	J-55	LTC

### CEMENTING

STRING NAME	STAGE #	LEAD TOP (est) (ft)	LEAD TOP (ver) (ft)	TAIL TOP (est) (ft)	TAIL TOP (ver) (ft)
SURFACE	1				
PRODUCTION	1	0.0	0.0		
INTERMEDIATE	1				

### BHA STRING

DRILL EQUIP CODE	DESCRIPTION	LENGTH	OD SIZE	ID SIZE

### PERFORATION

ZONE	JOB REPORT DATE	ZONE NAME	TOP DEPTH	BOTTOM DEPTH	HOLE SIZE	PEN SIZE	SQUEEZED
1	12/01/2012	GRAYBURG/SAN ANDRES	5830.00	5882.00	0.34	23.00	N

ID: 30-025-40744

Well Name: PETRUS D #10

Event#: 4

Report Dates: 05/24/2013

PERFORATION							
ZONE	JOB REPORT DATE	ZONE NAME	TOP DEPTH	BOTTOM DEPTH	HOLE SIZE	PEN SIZE	SQUEEZED
2	12/06/2012	GRAYBURG/SAN ANDRES	5518.00	5522.00	0.34	23.00	N
2	12/06/2012	GRAYBURG/SAN ANDRES	5536.00	5542.00	0.34	23.00	N
2	12/06/2012	GRAYBURG/SAN ANDRES	5566.00	5574.00	0.34	23.00	N
4	02/05/2013	GRAYBURG / SAN ANDRES	5114.00	5124.00	0.34	23.00	N