

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-025-40857
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 Bebidas State
8. Well Number 4H
9. OGRID Number 217955
10. Pool name or Wildcat Cruz; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3716' GR

**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 Production LLC

3. Address of Operator  
2208 W. Main Street, Artesia, NM 88210

4. Well Location  
 Unit Letter P : 388 feet from the South line and 380 feet from the East line  
 Section 16 Township 23S Range 33E NMPM Lea County

HOBBS OCD  
 NOV 22 2013

RECEIVED

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion Operations <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 9/11/13 to 9/13/13 MIRU. Test csg to 8500# for 15 mins. Drill out DVT. Load & test annulus to 1500# for 10 mins. Test ok.
- 9/16/13 to 9/18/13 Perforate 15443-15453' (60). Injection test into perms.
- 10/9/13 to 10/16/13 Perforate Bone Spring 11400-15400' (396). Acdz w/63161 gal 7 1/2% acid. Frac w/3304247# sand & 2613198 gal fluid.
- 10/22/13 Drilled out plugs. Left flow-through plug @ 15382'. Circulate clean.
- 10/23/13 to 10/24/13 Set 2 7/8" 6.5# L-80 tbg & pkr @ 10564'.
- 10/25/13 Began flowing back & testing.
- 11/11/13 to 11/12/13 POOH w/tbg & pkr. Set 2 7/8" 6.5# L-80 tbg @ 10691'. Place well on pump.

Spud Date: 7/28/13 Rig Release Date: 8/28/13

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

SIGNATURE Stormi Davis TITLE: Regulatory Analyst DATE: 11/20/13  
 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

**For State Use Only**

APPROVED BY: [Signature] TITLE: Petroleum Engineer DATE: JAN 27 2014  
 Conditions of Approval (if any):

JAN 27 2014