Submit 1 Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103		
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240			Revised July 18, 2013 WELL API NO.		
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of	25-10247	
<u>District III</u> – (505) 334-6178	1220 South St. Fran	1220 South St. Francis Dr.		FEE 🛛	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505					
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or U	7. Lease Name or Unit Agreement Name	
(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-10 FOR SUCH PROPOSALS.)			Alexander Rodgers		
1. Type of Well: Oil Well Gas Well Other		8. Well Number			
2. Name of Operator	MAY <b>29</b> 2014		9. OGRID Number		
COG Operating LLC	30 KZ		229137		
3. Address of Operator	RECEIVED		10. Pool name or Wildcat		
2208 W. Main Street, Artesia,	NM 88210		Tubb Oil & Gas		
4. Well Location	660 foot from the No.	th line and	660 fact from the	. Fost line	
Unit Letter A: Section 12	660 feet from the Nor Township 22S	Range 37E	660 feet from the NMPM	E East line . Lea County	
Section 12	11. Elevation (Show whether DR			Lea County	
	3345		<u></u>		
PERFORM REMEDIAL WORK TEMPORARILY ABANDON DULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:	TENTION TO:  PLUG AND ABANDON  CHANGE PLANS  MULTIPLE COMPL   d operations. (Clearly state all perting EE RULE 19.15.7.14 NMAC. For any control of 30 mins. No leak-off.	SUE REMEDIAL WOF COMMENCE DR CASING/CEMEN  OTHER: nent details, and gir	SSEQUENT REPORK	AND A   uding estimated date of	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE TITLE: Regulatory Analyst DATE: 5/27/14					
Type or print name: Stormi Da		s: sdavis@conch		ONE: (575) 748-6946	
For State Use Only					
APPROVED BY: APPROVED BY: Conditions of Approval (if any):	Stown TITLE DE	t. Supen	LIOU DATE	6/2/2014	

JUN 0/2 2014

