

Submit 1 Copy To Appropriate District Office  
 District I – (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88249  
 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  
**HOBBS OCD**  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

**JUN 03 2014**  
**RECEIVED**

WELL API NO. 30-025-41539
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 Stratojet 31 State Com
8. Well Number 4H
9. OGRID Number 229137
10. Pool name or Wildcat Berry; Bone Spring, North

**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 Operating LLC

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

4. Well Location  
 Unit Letter M : 540 feet from the South line and 660 feet from the West line  
 Section 31 Township 20S Range 35E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3743' GR

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.

4/3/14 to 4/26/14 MIRU. Load & test annulus to 1500#. Good test. Perforate Bone Spring 10989-14925' (396). Acdz w/72101 gal 7 1/2% acid. Frac w/3311507# sand & 2559089 gal fluid.

4/30/14 Drilled out CFP's & clean down to 14940'.

5/1/14 to 5/2/14 Set 2 7/8" 6.5# L-80 tbg & pkr @ 10008'. Test csg to 1500#. Test ok.

5/3/14 Began flowing back & testing.

5/14/14 to 5/15/14 Set 2 7/8" 6.5# L-80 tbg @ 10169' & place well on pump.

Spud Date: 2/23/14 Rig Release Date: 3/29/14

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: 6/2/14  
 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

**For State Use Only**

APPROVED BY: *Stormi Davis* TITLE: Petroleum Engineer DATE: JUN 09 2014  
 Conditions of Approval (if any):

**JUN 09 2014**