

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. 30-025-40955
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 Corazon State Unit
8. Well Number 13H
9. OGRID Number 229137
10. Pool name or Wildcat Wildcat G-08 S213304D; Bone Spring

**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  **HOBBS OCD**

2. Name of Operator  
COG Operating LLC **AUG 04 2014**

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

4. Well Location  
 Unit Letter 1 : 330 feet from the North line and 660 feet from the East line  
 Section 4 Township 21S Range 33E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3843' 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"/>			
CLOSED-LOOP SYSTEM <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.

4/15/14 to 4/24/14 MIRU. Drilled out float equipment & 5' new formation. Circ clean. Test annulus to 1400#. Good test. Set CBP @ 18255'. Perforate 18205-18215' (60) & perform injection test.

6/17/14 to 6/25/14 Perforate Bone Spring 11678-18155' (1224). Acdz w/205451 gal 7 1/2% acid. Frac w/10,552,486# sand & 10,826,085 gal fluid.

6/26/14 to 6/27/14 Drilled out CFP's.

6/28/14 Set 2 7/8" 6.5# L-80 tbg @ 10846' & pkr @ 10829'.

6/29/14 Began flowing back & testing.

Spud Date: 3/6/14 Rig Release Date: 4/3/14

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: 7/28/14  
 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: 08/12/14  
 Conditions of Approval (if any):

AUG 13 2014

*[Handwritten initials]*