

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. 30-025-41835
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 Kingfisher State Com
8. Well Number 1H
9. OGRID Number 229137
10. Pool name or Wildcat Airstrip; 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 **OCT 16 2014**

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

4. Well Location
 Unit Letter P : 290 feet from the South line and 740 feet from the East line
 Section 23 Township 18S Range 34E NMPM Lea County Lea

11. Elevation (Show whether DR, RKB, ~~RJ~~, GR, etc.)
3983' GR

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED LOOP SYSTEM <input type="checkbox"/> OTHER:	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <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.

8/22/14 to 9/6/14 MIRU. Set CBP @ 14530'. Test csg to 8513#. Perforate 10343-14505' (396). Acidz w/69364 gal 7 1/2% acid. Frac w/3299725# sand & 2848640 gal fluid.

9/9/14 Drilled out all frac plugs. Clean out to CBP @ 14530'. Circulate clean.

9/11/14 Set tbg & pkr @ 9634'. Test csg to 1500#.

9/12/14 Began flowing back & testing.

10/2/14 Set 2 7/8" 6.5# L-80 tbg @ 9755'. Place well on pump.

Spud Date: 7/20/14

Rig Release Date: 8/14/14

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: 10/8/14
 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: 10/17/14
 Conditions of Approval (if any):

OCT 20 2014 *DM*