

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. 30-025-21476	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. A-2614	
7. Lease Name or Unit Agreement Name STATE 32	
8. Well Number 1	
9. OGRID Number 164726	
10. Pool name or Wildcat SWD ELLENBURGER (96103)	

SUNDRY NOTICES AND REPORTS ON WELLS **HOBBS OGD**
(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.)
OCT 24 2014

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other
2. Name of Operator COBALT OPERATING, LLC RECEIVED
3. Address of Operator 3001 N. BIG SPRING, STE. 207 MIDLAND, TX 79705
4. Well Location Unit Letter A : 660 feet from the SOUTH line and 1980 feet from the WEST line Section 32 Township 23S Range 38E NMPM County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3307

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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: MIT <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.

MIT on 10/22/14 witnessed and passed by Bill Sonnamaker

Start: 570#
End: 570 #
32 Min

Spud Date:

4/30/2014

Rig Release Date:

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

SIGNATURE Joann Tercero TITLE REGULATORY ANALYST DATE 10/22/14

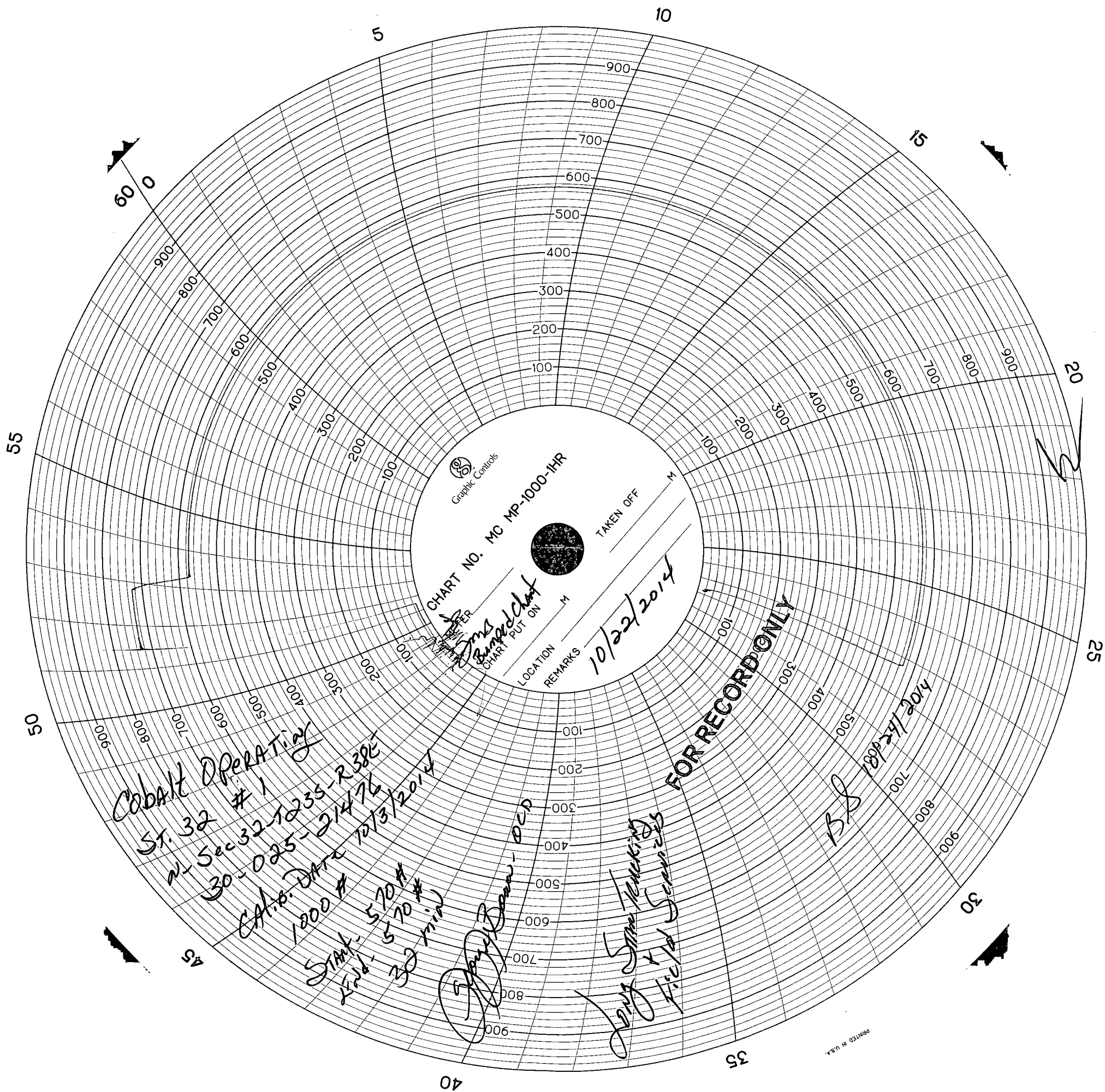
Type or print name JOANN TERCERO E-mail address: joann@cobaltoperating.com PHONE: 432-683-8030

For State Use Only

APPROVED BY: Bill Sonnamaker TITLE Staff Manager DATE 10/24/2014
Conditions of Approval (if any):

FOR RECORD ONLY

OCT 27 2014 L



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