

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
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> HOBSOCD		WELL API NO. 30-025-42000
2. Name of Operator COG Production LLC		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 2208 W. Main Street, Artesia, NM 88210		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>A</u> : <u>490</u> feet from the <u>North</u> line and <u>1265</u> feet from the <u>East</u> line Section <u>5</u> Township <u>24S</u> Range <u>33E</u> NMPM <u>Lea</u> County		7. Lease Name or Unit Agreement Name Cabo Blanco State
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3668' GR		8. Well Number 3H
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: <input type="checkbox"/>		9. OGRID Number 217955
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.		10. Pool name or Wildcat Triple X; Bone Spring, West

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: <input type="checkbox"/>		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"/>	
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11/19/14 MIRU. Test backside to 1300#. Good test. Set CBP @ 15410'. Test csg to 8505#. Good test. Perforate 15360-15370' (60). Injection test into perms.

12/13/14 to 12/16/14 Perforate Bone Spring 11342-15280' (396). Acdz w/74814 gal 7 1/2% acid. Frac w/3260099# sand & 3125961 gal fluid.

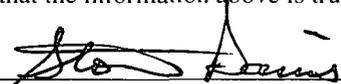
12/18/14 to 12/19/14 Drilled out frac plugs. Clean down to CBP.

12/24/14 Set 2 7/8" 6.5# L-80 tbg @ 10706' & pkr @ 10696'.

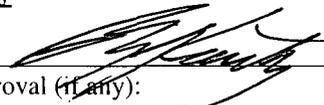
12/25/14 Began flowing back & testing.

Spud Date: 10/11/14 Rig Release Date: 11/2/14

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

SIGNATURE  TITLE: Regulatory Analyst DATE: 1/22/15
 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

For State Use Only

APPROVED BY:  TITLE: Petroleum Engineer DATE: 02/02/15
 Conditions of Approval (if any):

FEB 03 2015 