Submit 3 Copies To Appropriate District Office State of New Mexico Office	Form C-103 May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II OU CONSEDVATION DIVISION	30-025-26404
District III 1220 South St. Francis Dr.	Indicate Type of Lease STATE ⊠ FEE □
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505	STATE FEE State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	oute on ce dus beuse 170.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	Jalmat Yates Unit
PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other Injection	8. Well Number 009
2. Name of Operator	9. OGRID Number
COG Operating LLC	229137 10. Pool name or Wildcat
3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, TX 79701	Jalmat Tan-Yates Seven Rivers 33820
Well Location	
Unit Letter P: 400 feet from the South line and 1000 feet from the East line	
Section 12 Township 25S Range 36E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application or Closure	
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water	
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	_
TEMPORARILY ABANDON	
PULL OR ALTER CASING	
OTHER: OTHER: Request	for Active Status
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
of recompletion.	
COG Operating LLC request active status approval for the above well.	
1/09/06 Falco Oil Services RU and performed casing/packer integrity test in order to change the status of the	
well from inactive to an active water injection well. Well is now taking injections through tubing.	
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See attached chart & copy of chart on back of C103.	no0
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-	
grade tank has been/will be constructed or closed according to MOCD guidelines ., a general permit or an (attached) alternative OCD-approved plan .	
SIGNATURE TITLE Regulatory Analys	DATE 1/13/2006
Type or print name Diane Kuykendall E-mail address: dkuykendall@conchoresources.com Telephone.No. 432-685-4372	
For State Use Only OG FIELD REPRESENTATIVE II/STAFF MANAGER OG FIELD REPRESENTATIVE II/STAFF MANAGER	
APPROVED BY: Law W. With TITLE	DAAN 2 3 2006
Conditions of Approval (if and):	

