

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 August 1, 2011

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

WELL API NO. 30-025-23155	✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Pan Am Federal 25 SWD	✓
8. Well Number 1	✓
9. OGRID Number 229137	
10. Pool name or Wildcat SWD; Delaware	

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 SWD

2. Name of Operator
COG Operating LLC ✓

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

4. Well Location
 Unit Letter L : 1980 feet from the South line and 660 feet from the West line
 Section 25 Township 25S Range 33E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3331' GR

HOBBS OCD
 FEB 10 2016
 RECEIVED

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"/>			
OTHER: <input type="checkbox"/>		OTHER: MIT <input 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.

1/21/16 to 1/27/16 RU WSU. POOH w/tbg & pkr & inspect. Replaced 4 jts. Set 2 7/8" 6.5# J-55 Glassbore tbg & NP pkr @ 5105'. Test to 500# for 10 mins. Good test. Circ 75 bbls pkr fluid. Test tbg x csg annulus to 600# for 30 mins. Good test. Pressure test to 500# for 30 mins. Test good. OCD rep witnessed test.

Chart attached.

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: 2/1/16
 Type or print name: Stormi Davis E-mail address: sdavis@concho.com PHONE: (575) 748-6946

For State Use Only

APPROVED BY: Bill Semanaka TITLE: Staff Manager DATE: 2/10/16
 Conditions of Approval (if any):

FEB 11 2016

BS

cy

MIDNIGHT

900

800

700

600

500

400

300

200

100



Graphic Controls



DATE

11/27/16

BR 2221

PRINTED IN U.S.A. 6 PM

6 AM

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10

11

NOON

1

2

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4

5

COG Operating LLC
Raw Ann Federal 25 5400 (4)
Unit L, Sec 20, 7, 25, 28, 33, 35
API 30 - 025 - 23153

Start 500
Final 490
Time 32 min

PKR 5105' Raw new
Perk 5170' hwy

HL Fracture
LDD#
Lab # 09815
Cat 10-2-15

Bill
Jawant

BJ
7/10/16

abt

500