

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88201  
 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  
**HOBBS OCD**  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

|   |
|---|
| WELL API NO.<br>30-025-07133  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>Angel   |
| 8. Well Number<br>3   |
| 9. OGRID Number<br>286255   |
| 10. Pool name or Wildcat<br>Gladiola: Wolfcamp  |
| <b>F - 05-125-38E 1980 FNL 1987 FWL LEA Co.</b>   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3,870 GR                                      |

RECEIVED  
 APR 26 2018

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

2. Name of Operator  
Cobalt Operating, LLC

3. Address of Operator  
PO Box 51468, Midland Texas 79710

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 checked="" 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"/>                         | Recomplete <input type="checkbox"/>       | OTHER: <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.

The Temporarily Abandoned Status has expired. Cobalt Operating, LLC requests returning the subject well back to Temporarily Abandoned Status. An MIT test will be conducted per OCD regulations.

**NO PROD REPORTED 326 MONTHS.  
 LAST T/A EXPIRED - 4/10/2013.  
 PRODUCE OR P/A WELL. MAB**

Spud Date:  Rig Release Date:

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

SIGNATURE Mark Burkett TITLE: Engineer DATE: 4/25/2018

Type or print name Mark Burkett E-mail address: mark@cobaltoperating.com PHONE: 432-312-5939

**For State Use Only**

APPROVED BY: MABrown TITLE: Engineer DATE: 4/26/2018

Conditions of Approval (if any):

**DENIED**  
 MABrown  
 4/26/2018