

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. 30-025-28697
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-731
7. Lease Name or Unit Agreement Name New Mexico EF State
8. Well Number #3
9. OGRID Number 229137
10. Pool name or Wildcat Cruz Delaware

HOBBES CD
 FEB 01 2019
 RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK 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"/>
2. Name of Operator COG Operating, LLC
3. Address of Operator 600 W. Illinois Ave, Midland, TX 79701
4. Well Location Unit Letter <u>M</u> : <u>990</u> feet from the <u>S</u> line and <u>330</u> feet from the <u>W</u> line Section <u>17</u> Township <u>23S</u> Range <u>33E</u> NMPM County <u>Lea</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3712' GR

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 checked="" 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: <input type="checkbox"/>	

SP-
 PNR

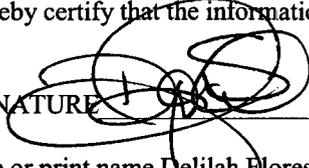
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01/09/19 MIRU plugging equipment. Opened well to 800 PSI. Dug out cellar, NU BOP, POH w/ 20 stands of tbg. 01/10/19 RU vacuum pump, well had water flow. Finished POH w/ tbg. Set 5 1/2" CIBP @ 5110'. Circulate hole w/ salt gel. Pressure test csg, held 50 psi. Spotted 25 sx class C cmt @ 5110-4860'. (Kerry Fortner w/ NM OCD okayed not to WOC & Tag). Spotted 25 sx class C cmt @ 2510-2260'. Spotted 25 sx class C cmt @ 2000-1750'. WOC. Tagged plug @ 1719'. Perf'd csg @ 701'. Pressured up to 500 psi w/ no circulation. ND BOP. Spotted 85 sx class C cmt @ 751' & circulated to surface. Verified cmt @ surface. Riggged down & moved off. 01/17/19 Moved in backhoe and welder, dug out cellar, cut off well head, and verified cement to surface (Kerry Fortner w/ NM OCD as witness). Welded on "Below Ground Dry Hole Marker". Backfilled cellar, cut off deadmen, cleaned location, and moved off.

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  TITLE Regulatory Technician DATE 1/29/19

Type or print name Delilah Flores E-mail address: dflores2@concho.com PHONE: 575-748-6946
For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 2-6-19
 Conditions of Approval (if any):