Submit 1 Copy To Appropriate District State of New Me Office Energy Minorpha and Net	
District 1 (575) 393-6161 Energy, Minerals and Natu 1625 N. French Dr., Hobbs, NM 88240 District II (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION District III (505) 334-6178 1220 South State	WELL API NO.OIVISIONncis DAY5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Francis Santa Francis Dr., Santa Fe, NM 1220 S. St. Francis Dr., Santa Fe, NM 87505	STATE FEE 7903 6. State Oil & Gas Lease No.
Totological Relations Relating Relating Relating Relating Relations Relations Relations Relat	See BACK TO A 7. Lease Name or Unit Agreement Name OR SUCH Hale
1. Type of Well: Oil Well 🛛 Gas Well 🗋 Other 🗌	8. Well Number 1-Y
2. Name of Operator <u>Cobalt Operating, LLC</u> 3. Address of Operator	9. OGRID Number 286255 10. Pool name or Wildcat
PO Box 51468, Midland Texas 79710	' Midway Strawn
Unit J, 2260 FSL and 1650' FEL, Section 8, T-17-S, R-37-E	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)3,781 GR	
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 □ ALTERING CASING □ TEMPORARILY ABANDON □ CHANGE PLANS □ PULL OR ALTER CASING □ MULTIPLE COMPL □ DOWNHOLE COMMINGLE □ CASING/CEMENT JOB □ CLOSED-LOOP SYSTEM □ V	
OTHER:	OTHER:
 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. Repair or replace existing downhole pump. Anticipate work to begin March 25th, 2018. 	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the b	best of my knowledge and belief.
SIGNATURE Man General TITLE: Engineer DATE: 3/20/2019	
Type or print name Mark Burkett E-mail address: mark@cobaltoperating.com PHONE: 432-312-5939	
APPROVED BY:	
Conditions of Approval (if any).	
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