

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  
**HOBBS OCD**  
**OCT 30 2019**

WELL API NO. <b>30-025-32955</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>10712</b>
7. Lease Name or Unit Agreement Name <b>New Mexico DW State</b>
8. Well Number <b>3</b>
9. OGRID Number <b>229137</b>
10. Pool name or Wildcat <b>Wildcat 96032</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3647' GL</b>

**SUNDRY NOTICES AND REPORTS ON WORK**  
 (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  
**COG Operating, LLC**

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

4. Well Location  
 Unit Letter **D**: **660** feet from the **North** line and **660** feet from the **West** line  
 Section **6** Township **22S** Range **35E** NMPM County **Lea**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>	

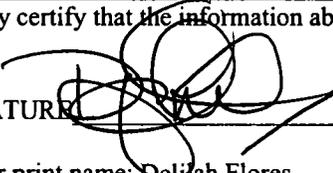
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

08/26/19 MIRU plugging equipment. POH w/ rods & pump. 08/27/19 Dug out cellar. ND well head, NU BOP. POH w/ tbg & tbg anchor. Set 5 1/2" CIBP @ 5040'. Circulated hole w/ MLF. Pressure tested csg, held 600 PSI. 08/28/19 Spotted 50 sx class C cmt @ 5040-4535'. Spotted 25 sx class C cmt w/ 2% CACL @ 2150-1899'. WOC. Tagged plug @ 1950'. Perf'd csg @ 692'. Pressured up on perfs to 1000 PSI. Perf'd csg @ 100'. Broke circulation on the 5 1/2" & 8 5/8" csg. Spotted 30 sx class C cmt @ 740-437'. WOC. 08/28/19 Tagged plug @ 450'. ND BOP. Squeezed 40 sx class C cmt through perfs @ 100' & circulated to surface up the 5 1/2" & 8 5/8". Rigged down & moved off. 09/06/19 Moved in backhoe and welder, dug out cellar, cut off well head, and Kerry Fortner w/ NM OCD verified cement to surface. Welded on "Above 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: 10/28/19

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 C.O. A DATE 11-1-19  
 Conditions of Approval (if any):