

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**

WELL API NO. <b>30-025-24549</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>K-4735</b>
7. Lease Name or Unit Agreement Name <b>Joannie-Shell</b>
8. Well Number #1
9. OGRID Number <b>229137</b>
10. Pool name or Wildcat <b>E.K. Yates, 7 Rvs, Qn</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4071' RKB</b>

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PUMPABANDON 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  
**600 W. Illinois Ave, Midland, TX 79701**

4. Well Location  
 Unit Letter **D** : **330** feet from the **N** line and **330** feet from the **W** line  
 Section **16** Township **18S** Range **34E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**4071' RKB**

**RECEIVED**  
 MAR 16 2020

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"/>	<b>PNR</b>
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

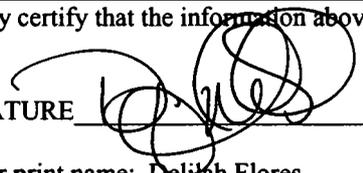
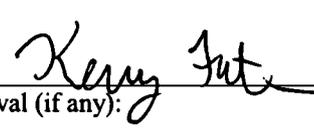
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

02/12/20 MIRU plugging equipment. Dug out cellar. 02/13/20 ND wellhead, NU BOP. POH w/ tbg. RIH w/ wireline & tagged @ 1100'. POH. RIH w/ drill bit & scraper to 4450'. 02/14/20 POH. Set 4 1/2" CIBP @ 4400'. Circulated hole w/ MLF. Pressure tested csg, held 0 PSI. Spotted 25 sx class C cmt @ 4400-4032'. WOC. 02/17/20 Tagged plug @ 4040'. Spotted 25 sx class C cmt w/ 2% CACL @ 2566-2202'. WOC. Pressure tested csg, held 500 PSI. Tagged plug @ 2210'. Perf'd csg @ 1355'. Established injection rate of 2 BPM @ 700 PSI. Sqz'd 35 sx class C cmt @ 1355-1205'. WOC. 02/18/20 Tagged plug @ 1180'. Isolated holes in csg @ 400' to surface. ND BOP, NU wellhead. Sqz'd 150 sx class C cmt @ 450' & circulated to surface. Riggd down & moved off. 02/19/20 20 Moved in backhoe and welder, dug out cellar, cut off well head, and Kerry Fortner w/ OCD verified cement to surface. 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: 3/9/2020  
 Type or print name: Delilah Flores E-mail address: dflores@concho.com PHONE: 575-748-6946  
**For State Use Only**  
 APPROVED BY:  TITLE: COA DATE: 3-13-20  
 Conditions of Approval (if any):