

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

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

WELL API NO. 30-025-46420
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Pickelhaube State
8. Well Number 701H
9. OGRID Number 229137
10. Pool name or Wildcat WC-025 G-09 S253402N; WOLFCAMP

**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  
COG Operating LLC

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

4. Well Location  
Unit Letter B : 324 feet from the North line and 2503 feet from the East line  
Section 36 Township 24S Range 34E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3388' GR

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 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: Completion Operations <input checked="" 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.

1/12/20 Test 9 5/8" x 5 1/2" annulus to 1500# for 30 mins. Good test. Set Composite Bridge Plug @ 17,745'. Test to 11,281#.

2/16/20 to 2/22/20 Perf 13,020 - 17,720' (750). Acdz w/ 36,582 gal 7-1/2%; frac w/ 9,644,950# sand & 8,997,282 gal fluid.

2/26/20 to 2/27/20 Drill out CFP's. Clean down to PBD @ 17,745'.

3/3/20 to 3/5/20 Set 2 7/8" 6.5# L-80 tbg @ 12,362' & pkr @ 12,352'. Installed gas lift system.

Spud Date: 10/31/19

Rig Release Date: 12/6/19

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

SIGNATURE Amanda Avery TITLE: Regulatory Analyst DATE: 3/12/2020  
Type or print name: Amanda Avery E-mail address: aavery@concho.com PHONE: (575) 748-6962

**For State Use Only**

APPROVED BY: [Signature] TITLE: Lm DATE: 5/26/20  
Conditions of Approval (if any):