

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. 30-025-42463
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 Macho Nacho 7 State SWD
8. Well Number 1
9. OGRID Number 229137
10. Pool name Bell Canyon; Cherry Canyon
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3513

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 SWD

2. Name of Operator
COG OPERATING LLC

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

4. Well Location
 Unit Letter F : 2000 feet from the NORTH line and 2200 feet from the WEST line
 Section 7 Township 24S Range 33E NMPM Lea County NM

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 checked="" 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: <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.

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

MIRU 3-12-2020 . POOH with 4.5" FG-lined tubing and injection packer. Found hole in collar of joint #23. RIH with new injection packer on 126 joints 4.5" FG-lined injection tubing. Circulate inhibited packer fluid in tubing x casing annulus, set packer at 5278' and run MIT. Tested good to 740 psi for 30 minutes. Left message NMOCD Hobbs to witness test. Test not witnessed by NMOCD. Repair workover finished 3-23-2020.

SIGNATURE Jeanette Barron TITLE Regulatory Technician II DATE 04.01.20
 Type or print name

Jeanette Barron E-mail address: jbarron@concho.com PHONE: 575-748-6974

For State Use Only

APPROVED BY: Kerry Smith TITLE CO A DATE 6-23-20
 Conditions of Approval (if any)