

Submit 3 Copies to Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-37717
Indicate Type of Lease STATE ☒ FEE ☐
State Oil & Gas Lease No.

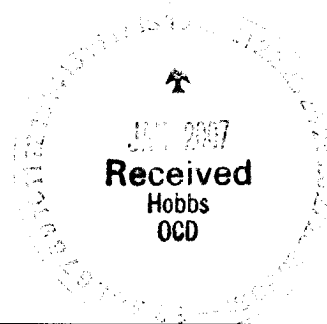
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name RED RAIDER STATE
1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐		8. Well Number 008
2. Name of Operator COG Operating LLC		9. OGRID Number 299137
3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, TX 79701		10. Pool name or Wildcat Eumont; Yates-7 Rivers-Queen (Oil)
Well Location Unit Letter N : 330 feet from the South line and 1980 feet from the West line Section 19 Township 20S Range 36E NMPM County Lea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3650' GR		
Pit or Below-grade Tank Application ☐ or Closure ☐		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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 ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
OTHER: Request APD 1 year extension ☒		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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Due to rig availability,
COG Operating LLC respectfully requests permission
for a one year extension to this APD
scheduled to expire 2-17-07.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Phyllis A. Edwards TITLE Regulatory Analyst DATE 1/17/06

Type or print name Phyllis A. Edwards E-mail address: pedwards@conchoresources.com Telephone No. 432-685-4340
For State Use Only

APPROVED BY: Larry W. Wink TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE JAN 31 2007
Conditions of Approval (if any): _____