Submit 3 Copies To Appropriate District Office District State of New Mexico Energy, Minerals and Natural Resources 1625 N. French Dr., Hoobs, NM 88240	Form C-103 May 27, 2004 WELL API NO
District II 1301 W. Grand, Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	WELL API NO. 30-D15-27995
District IIN U Artes NM 87410 District IIN U Artes NM 87410 District IIN U Artes NM 87410 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd Aziec, NM 87410 District IV Santa Fe, NM 87505 Santa Fe, NM 87505	6. 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 TAURUS STATE COM ✓
1. Type of Well: Oil Well Gas Well Other	8. Well Number 002
2. Name of Operator COG Operating LLC	9. OGRID Number 229137 ✓
3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, TX 79701	10. Pool name or Wildcat WILDCAT; WOLFCAMP
4. Well Location	
Unit Letter <u>I</u> : <u>1980</u> feet from the <u>South</u> line and	330 feet from the <u>East</u> line
Section 10 Township 15S Range 31E NMPM	County CHAVES
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4396' GR	
Pit or Below-grade Tank Application or Closure	22 / San San C 20 / W 22 / San
Pit typeDepth to GroundwaterDistance 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: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	LLING OPNS. P AND A
OTHER: Request APD extension	П
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.	
COG Operating LLC respectfully requests an extension to this APD scheduled to expire 12-14-08.	
4 m Wenjion	
mayimu , year	
Maximum lytension is I for I year	
HPD Expires 12-14-09	
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 TITLE Agent	DATE <u>11/14/08</u>
Type or print name Robyn M. Odom E-mail address: rodom@conchoresourc	NOV 1 0 2009
APPROVED BY: TITLE Conditions of Approval (if any):	DATE