| Office | State of New Mexico | Form C-103 |
|--|--|--|
| District I Energ | gy, Minerals and Natural Resources | October 13, 2009 |
| 1625 N. French Dr., Hobbs, NM 88344 | n | WELL API NO. |
| District II 1301 W. Grand Ave., Artesia, NM 88210 | CONSERVATION DIVISION | 30-025-39836 |
| D1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1220 South St. Francis Dr. | 5. Indicate Type of Lease STATE X FEE |
| 1000 Rio Brazos Rd., Aztec, NM 87067 2 5 2010 District IV | Santa Fe, NM 87505 | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, MOBBSOCE 87505 |) | o. State on & Sas Estate No. |
| SUNDRY NOTICES AND REPORTS ON WELLS | | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DR | | |
| DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS) | | Edward State |
| 1. Type of Well: Oil Well 🛛 Gas Well | Other | 8. Well Number 10 |
| Name of Operator COG Operatin | ag LLC. | 9. OGRID Number 229137 |
| 3. Address of Operator | | 10. Pool name or Wildcat 44500 |
| 550 W. Texas Ave. Ste. 13 | 00. Midland, Tx 79701 | Maljamar; Yeso, West |
| 4. Well Location | | |
| Unit Letter <u>K</u> : <u>1650'</u> | feet from the <u>South</u> line and | |
| | Township 17S Range 32E | NMPM County LEA |
| 11. Eleva | ation (Show whether DR, RKB, RT, GR, e | tc.) |
| | 4039' GR | St. State Co. |
| 10 (1) | | P (01 P (|
| 12. Check Appropria | te Box to Indicate Nature of Notic | e, Report or Other Data |
| NOTICE OF INTENTIO | N TO: SL | IBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING | | |
| TEMPORARILY ABANDON CHANGE | PLANS 🗌 COMMENCE D | PAND A |
| PULL OR ALTER CASING MULTIPL | E COMPL CASING/CEME | ENT JOB |
| DOWNHOLE COMMINGLE | | |
| OTHER: Change Surface Cas | sing Depth 🛛 OTHER: | П |
| | | and give pertinent dates, including estimated date |
| of starting any proposed work). SEE F | RULE 19.15.7.14 NMAC. For Multiple (| Completions: Attach wellbore diagram of |
| proposed completion or recompletion. | | |
| | | |
| This well was per | mitted with the setting depth of the sur | face casing at 800'. |
| • | | |
| COG Operating LLC respectfully requests to change the surface casing setting depth to be 650'. | | |
| All other components of the casing program will remain the same. All other components of the casing program will remain the same. Author Components of the casing program will remain the same. Author Components of the casing program will remain the same. Author Components of the casing program will remain the same. Author Components of the casing program will remain the same. Author Components of the casing program will remain the same. Author Components of the casing program will remain the same. Author Components of the casing program will remain the same. Right Components of the casing program will remain the same. Author Components of the casing program will remain the same. Right Components of the casing program will remain the same. Right Components of the casing program will remain the same. Right Components of the casing program will remain the same. Right Components of the casing program will remain the same. Right Components of the casing program will remain the same. | | |
| | 1 -10 1 1 = | I I descet well #4 |
| | duple Unghan | e in augus |
| | 446 in 10 7061 | |
| DAVE, KANTERO GTATE, NO. | WINK WY | |
| C36-193-6161 E | <u> </u> | |
| Spud Date: | Rig Release Date: | |
| - | | |
| | | |
| I hereby certify that the information above is tru | e and complete to the best of my knowle | dge and belief. |
| | | |
| SIGNATURE TOOM (HO) | TITLE Regulatory A | nalyst DATE 10-22-2 <u>010</u> |
| SIGNATURE / CAMPA | 111LE Regulatory A | 10-22-2010 |
| Type or print name Robyn M. Odom | E-mail address: rodom@conchorer | sources.com PHONE: 432-685-4385 |
| For State Use Only | | |
| | | OCT 2 6 2010 |
| APPROVED BY: | TITLE | DATE |
| Conditions of Approval (if any): | | |

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