Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District 1 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30025-35615 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco **STATE FEE** 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV State Oil & Gas-Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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 Largo '36' State PROPOSALS.) 1. Type of Well: Oil Well 🔲 Gas Well Other Injection Well No. Name of Operator Concho Oil & Gas Corp Pool name or Wildcat Address of Operator 110 W. Louisiana Ste 410; Midland, Tx 79701 Wildcat Atoka Well Location 1980 feet from the from the North line and 1980 Unit Letter G: NMPM Section 36 Township 10S Range 32E Lea County Elevation (Show whether DR, RKB, RT, GR, etc.) 4299 GR 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND** TEMPORARILY ABANDON **ABANDONMENT MULTIPLE** CASING TEST AND PULL OR ALTER CASING COMPLETION **CEMENT JOB** OTHER: OTHER: Request for 1 Point Extension 12. 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. CONCHO OIL & GAS CORP. RESPECTFULLY REQUEST APPROVAL FOR AN EXTENSION OF THE ONE POINT BACK PRESSURE TEST FOR THE ABOVE GAS WELL. Please allow Concho a 60-day extension on the One Point Test for the above well. The well has currently not stabilized and until stabilized production is achieved we would request this extension. All completion paperwork has been filed with the exception of the One Point Test. true and complete to the best of my knowledge and belief. I hereby certify that the information above

TITLE

Terri Stathe

Type or print name
(This space for State use)

Conditions of approval, if any:

APPPROVED BY

Production Analyst

Telephone No. 915/683-7443

DATE

DATE

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