Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

DEC 06 2011

OCD. Artesia FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

5.	Lease Serial No
	NMNM0397623

SUNDRY Do not use thi abandoned wel	NMNM0397623 6 If Indian, Allottee or Tribe Name					
SUBMIT IN TRIF	erse side.	se side. 7 If Unit or CA/Agreement, Name and/or No.				
1 Time of Well				9 Well Name and No		
Type of Well Gas Well ☐ Oth	er		8. Well Name and No. FOLK FEDERAL 25			
2 Name of Operator COG OPERATING LLC	Contact. CF E-Mail: cjackson@co	9. API Well No. 30-015-39273-00-X1				
3a. Address 550 WEST TEXAS AVENUE S MIDLAND, TX 79701		o. (include area code) 86-3087 10. Field and Pool, EMPIRE		10. Field and Pool, or EMPIRE	Exploratory	
4. Location of Well (Footage, Sec., T			11 County or Parish,	and State		
Sec 17 T17S R29E SWNW 2	509FNL 330FWL			EDDY COUNTY	', NM	
12. CHECK APPR	ROPRIATE BOX(ES) TO I	NDICATI	NATURE OF	NOTICE, R	EPORT, OR OTHEI	R DATA
TYPE OF SUBMISSION	TYPE OF ACTION .					
NI d' CI d	☐ Acidize	Dec	pen	□ Product	ion (Start/Resume)	☐ Water Shut-Off
☐ Notice of Intent	☐ Alter Casing	_	cture Treat	Reclam		☐ Well Integrity
Subsequent Report	Casing Repair	_	W Construction	☐ Recom		_
☐ Final Abandonment Notice	Change Plans	_	g and Abandon	_	arily Abandon	Other Well Spud
J	Convert to Injection	_	Plug Back Water			
testing has been completed. Final Aldetermined that the site is ready for f. 11/15/11 Spud 17-1/2 @ 7:30 11/16/11 TD 17-1/2 @ 403. R. 11:30PM. Circ 87sx. WOC 18 11/18/11 TD 11 @ 950. Ran 2 Circ 227sx. WOC 18hrs. Test 11/24/11 TD 7-7/8 @ 5502. R. 2:32PM. Circ 151sx WOC 24h	inal inspection.) PM. an 9jts 13-3/8 H40 48# @ 4 hrs. Test BOP to 2000# for : 11jts 8-5/8 J55 24# @ 950. (BOP to 2000# for 30 min, o an 122jts 5-1/2 J55 17# @ 8	03. Cmt v 30 min, ol Cmt w/300 k. 5492. Cm	//200sx C. lead, 2 c. Osx C. lead, 200s tw/550sx C. lead	200sx C. tail x C. tail. PD 1, 400sx C. t	. PD @ @ 10AM.	and the operator has
	Ç					
	Accepted for record					
14. Thereby certify that the foregoing is	true and correct. Electronic Submission #124	1263 verifi	ed by the BLM We	ell Informatio	n Svstem	•
Commi	For COG OPE itted to AFMSS for processing	ERATING L	LC. sent to the C	arlsbad	-	
Name (Printed/Typed) CHASITY	Title PREPARER					
		-		_	, , <u> </u>	
Signature (Electronic S	Submission)		Date 11/29/2	2011		
	THIS SPACE FOR	FEDER	AL OR STATE	OFFICE U	SE	
Approved By ACCEPT	JAMES A TitleSUPERVI	AMOS SOR EPS		Date 12/02/2011		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent to conduct the conduction of the conduct	uitable title to those rights in the su uct operations thereon	Office Carlsba				
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a cr statements or representations as to	ime for any any matter	person knowingly an within its jurisdiction	id willfully to n	nake to any department or	r agency of the United