

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No NMLC028731B
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact KACIE CONNALLY E-Mail: kconnally@concho.com		7. If Unit or CA/Agreement, Name and/or No NMNM111789X
3a. Address 550 WEST TEXAS AVENUE SUITE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432.221.0336	8. Well Name and No DODD FEDERAL UNIT 902H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 10 T17S R29E SENE 1775FNL 85FEL		9. API Well No 30-015-40624
		10. Field and Pool, or Exploratory DODD - GLORIETA-UPPER YESO
		11. County or Parish, and State EDDY COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

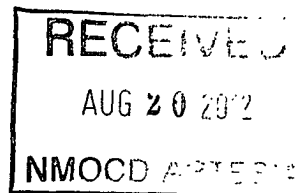
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

COG Operating respectfully requests permission to change the name and number of this well to:

Dodd Federal Unit #902H

A revised C-102 is attached for your review.

WAS THE 103H

**SUBJECT TO LIKE  
APPROVAL BY STATE**Accepted for record  
NMOCDtes  
8/21/2012

14. I hereby certify that the foregoing is true and correct	
Electronic Submission #145150 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by BEVERLY WEATHERFORD on 08/09/2012 (12BMW0536SE)	
Name (Printed/Typed) KACIE CONNALLY	Title PERMITTING TECH
Signature (Electronic Submission)	Date 08/07/2012

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By DUNCAN WHITLOCK	Title LEAD PETROLEUM ENGINEERING TECH	Date 08/16/2012
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office Carlsbad

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

DISTRICT I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720

DISTRICT III  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
Property Code	Property Name <b>DODD FEDERAL UNIT</b>	Well Number <b>902H</b>
OGRID No.	Operator Name <b>COG OPERAING, LLC</b>	Elevation <b>3623'</b>

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	10	17-S	29-E		1775	NORTH	85	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	10	17-S	29-E		1775	NORTH	1650	WEST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<p><b>CORNER COORDINATES TABLE</b></p> <p>Ⓐ - Y=674003.7 N, X=581955.1 E        Ⓑ - Y=674009.3 N, X=585916.2 E        Ⓒ - Y=672683.4 N, X=581958.6 E        Ⓓ - Y=672688.7 N, X=585919.9 E</p> <p><b>GEODETIC COORDINATES</b> NAD 27 NME</p> <p><b>SURFACE LOCATION</b> Y=673555.1 N X=585832.5 E LAT.=32.851375° N LONG.=104 053837° W</p> <p><b>BOTTOM HOLE LOCATION</b> Y=673548.4 N X=582279.0 E</p> <p><b>DETAIL</b> 3618.9' 3635.5' 600' 600' 3614.8' 3628.6'</p> <p>GRID AZ = 269°53'26" HORZ. DIST. = 3554.4'</p> <p>SEE DETAIL 85'</p>	<p><b>OPERATOR CERTIFICATION</b></p> <p>I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p>Signature _____ Date _____</p> <p>Printed Name _____</p> <p>E-mail Address _____</p> <p><b>SURVEYOR CERTIFICATION</b></p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>DECEMBER 3, 2011</p> <p>Date of Survey _____ Signature &amp; Seal of Professional Surveyor.</p> <p><b>RONALD J. EIDSON</b> NEW MEXICO 3239 Certificate Number 12641 Ronald J. Eidson 3239 DSR Rel WO# 1111111111 SC WO 12 13 1396</p>
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