## NM OIL CONSERVATION

Form 3160- 5 (August, 2007)

ARTESIA DISTRICT
UNITED STATES DEPARTMENT OF THE INTERIOR 5 2014

FORM APPROVED

OMB No. 1004- 0137

	BUREAU OF LAND	) MANAGEMENT		L	Expires: July 31, 2010	
SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to re-enter an				5. Lease Serial No. SHL: NM54291, BHL: NM58809		
				6. If Indian, Allot		
	doned well. Use Form 316		osals.	7 If Unit or CA	Agreement Name and/or No.	
1. Type of Well	TRIPLICATE - Other Ins	structions on page 2.		- In class of Case	Transcribert Transcribert Tro	
X Oil Well Gas Well Other				8. Well Name and No.		
2. Name of Operator  COC Operating LLC				JR's Horz Federal Com #3H		
COG Operating LLC  3a. Address		3b. Phone No. (includ	e area code)	9. API WEILING.	20.016.25042	
2208 W. Main Street		575-748-6946			30-015-37842  10. Field and Pool, or Exploratory Area	
Artesia, NM 88210  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  Lat.				<del></del>	ol, or Exploratory Area nyon; Bone Spring, South	
SHL: 480' FNL & 1980' FEL, Unit B (NWNE) Sec 10-T26S-R29E Long.					11. County or Parish, State	
BHL: 331' FSL & 2014' FEL, Unit O (SWSE) Sec 10-T26S-R29E				Eddy	NM NM	
12. CHECK APPROPRIATE BOX	(S) TO INDICATE NATU	RE OF NOTICE, REPOR	RT, OR OTHER I	DATA		
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	Acidize	Deepen	Production ( S	Start/ Resume)	Water Shut-off	
	Altering Casing	Fracture Treat	Reclamation		Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	
	Change Plans	Plug and abandon	Temporarily A	Abandon	Drill Out & GC	
Final Abandonment Notice	Convert to Injection	Plug back	Water Dispos			
following completion of the involve	Abandonment Notice shall be inspection.)  all plugs & clean to PBTE	results in a multiple completifiled only after all requirer  D @ 13000'.	on or recompletion	in a new interval,	eports shall be filed within 30 days a Form 3160-4 shall be filed once on completed, and the operator has	
14. I hereby certify that the foregoing is true Name (Printed/ Typed)  Stormi Davis  Signature:	Title: Regu	ılatory Analyst	•			
	THIS SPACE F	FOR FEDERAL OR ST		SE		
Approved by:		Title:		Dat	e:	
Conditions of approval, if any are attach certify that the applicant holds legal or e	equitable title to those rights in	es not warrant or	,			
Title 18 U.S.C. Section 1001 AND Titl States any false, fictitiousor fraudulent statem (Instructions on page 2)	le 43 U.S.C. Section 1212, ma	ke it a crime for any persor	n knowingly and wil	fully to make any	department or agency of the United	
(manachona on page 2)						