

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
ArtesiaFORM 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.*5. Lease Serial No.
NMLC028793A

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.7. If Unit or CA/Agreement, Name and/or No.
NMNM88525X

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
Multiple--See Attached2. Name of Operator
COG OPERATING LLCContact: ONETHA B AARON
E-Mail: OAARON@CONCHO.COM9. API Well No.
Multiple--See Attached3a. Address
600 W ILLINOIS AVENUE
MIDLAND, TX 797013b. Phone No. (include area code)
Ph: 432-818-2319
Fx: 432-221-085810. Field and Pool, or Exploratory
BURCH KEELY-GLORIETA-UPPER YE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Multiple--See Attached

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 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 checked="" 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	Venting and/or Flaring
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recompleat 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 recompleat 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.)

Actual gas flared for this battery for 5/6/13 to 8/6/13 is as follows:

(Permit approval: Electronic Submission #206103)

MAY Total for Battery = 0 mcf
JUNE Total for Battery = 0 mcf
JULY Total for Battery = 0 mcf
AUG Total for Battery = 0 mcf

Number of wells flared: (6)

BURCH-KEELY UNIT #418 30-015-36183

NM OIL CONSERVATION
ARTESIA DISTRICT

OCT 30 2015

RECEIVED

Accepted for record
NMOCD

14. I hereby certify that the foregoing is true and correct. Electronic Submission #253746 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by CATHY QUEEN on 07/15/2015 (15CQ0507SE)	
Name (Printed/Typed) ONETHA B AARON	Title ENGINEERING TECH
Signature (Electronic Submission)	Date 07/18/2014
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By	Title
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
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 **

Additional data for EC transaction #253746 that would not fit on the form

Wells/Facilities, continued

Agreement	Lease	Well/Fac Name, Number	API Number	Location
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 418	30-015-36183-00-S1	Sec 18 T17S R30E SESE 25FSL 900FEL 32.827430 N Lat, 104.005720 W Lon
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 643	30-015-39570-00-S1	Sec 19 T17S R30E SENW 1535FNL 2310FWL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 651	30-015-40278-00-S1	Sec 19 T17S R30E Lot 2 1474FNL 922FWL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 654	30-015-40280-00-S1	Sec 19 T17S R30E NWNE 660FNL 1805FEL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 965H	30-015-40973-00-S1	Sec 19 T17S R30E SENE 2350FNL 493FEL

32. Additional remarks, continued

BURCH-KEELY UNIT #643 30-015-39570
BURCH-KEELY UNIT #651 30-015-40278
BURCH-KEELY UNIT #654 30-015-40280
BURCH-KEELY UNIT #914 30-015-40300
BURCH-KEELY UNIT #965H 30-015-40973

Reason: DCP SI