Form 3160-5 (August 2007)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT OFFICE SUNDRY:NOTICES AND REPORTS ON WELLS

FORM APPROVED
OMB NO. 1004-013:
Expires: July 31, 2016

	Lease Serial No.
٠.	Lease Serial Ivo.
	NIKANIKA 1 2020E

NMNM120895		
	-	

Do not use this form for proposals to drill or toge-enter an abandoned well. Use togh 1010 (2001) to see proposals.					6. If Indian, Allottee or Tribe Name		
Type of Well	8. Well Name and No. CABO WABO 25 FEDERAL COM 4H						
Name of Operator     COG PRODUCTION LLC	9. API Well No. 30-015-42483-00-X1						
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		3b. Phone No Ph: 575.74	o. (include area code) 48.6945		10. Field and Pool, or Exploratory WILLOW LAKE		
4. Location of Well (Footage, Sec., T	, R., M., or Survey Description	1)			11. County or Parish, and State		
Sec 25 T25S R29E SESE 330 32.094376 N Lat, 103.929944	EDDY COUNTY, NM						
12. CHECK APPE	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF	NOTICE, R	EPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION TYPE OF ACTION							
Notice of Intent     ■     Notice of Intent     Not	□ Acidize	Dee	pen	□ Product	ion (Start/Resume)	■ Water Shut-Off	
	■ Alter Casing	☐ Frac	ture Treat	Reclam	ation	Well Integrity	
☐ Subsequent Report	☐ Casing Repair	☐ New	Construction	☐ Recomp	olete	☑ Other	
☐ Final Abandonment Notice	Change Plans	☐ Plug	g and Abandon		arily Abandon	Change to Original A PD	
	☐ Convert to Injection	C Plug	Plug Back		Disposal		
following completion of the involved testing has been completed. Final At determined that the site is ready for fit COG Operating LLC, respectf	pandonment Notices shall be fil inal inspection.)	led only after all	requirements, inclu	ling reclamatio	n, have been completed,	and the operator has	
NM OIL CONSERVATION  ARTESIA DISTRICT  APPROVED FOR 24 MONTH PERIOD  ENDING 7 - 2 - 2018							
	RECEIVED				Accepted for	record - NMOCD	
14. I hereby certify that the foregoing is	# Electronic Submission For COG Pl	RODUCTION L	LC, sent to the	Carlsbad	-		
Committed to AFMSS for processing by PF Name(Printed/Typed) MAYTE X REYES			Title REGULATORY ANALYST				
			•				
Signature (Electronic S		nission) Date 05/16/2016  THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
	THIS SPACE FO	OK LEDEKA	LORGIAIE	JI I ICE U			
Approved By J. D. Rute	Title LOE	7		Date 3/16			
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu	itable title to those rights in the	s not warrant or e subject lease	Office CF	0			

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.

