

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.*

**NMOCD**  
**Artesia**

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC028793A
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: SANDY BALLARD E-Mail: sballard@concho.com		7. If Unit or CA/Agreement, Name and/or No. NMNM88525X
3a. Address 600 W. ILLINOIS AVE. MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4373	8. Well Name and No. BURCH KEELY UNIT 582
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 18 T17S R30E 1310FSL 1310FEL		9. API Well No. 30-015-36263
		10. Field and Pool or Exploratory Area BURCH KEELY;GLRT-UP YESO
		11. County or Parish, State EDDY COUNTY, NM

**12. CHECK THE 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"/> Hydraulic Fracturing	<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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Burch Keely Unit #582  
BURCH KEELY UNIT 18B BATTERY  
Permit approval: Electronic Submission # 373688)  
Actual gas flared for this battery for 4/24/17 to 7/23/2017 is as follows:  
April  
Total Battery = 0 mcf  
May  
Total for Battery = 0 mcf  
June  
Total Battery = 0 mcf  
July  
Total for Battery = 0 mcf

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

NOV 29 2017

RECEIVED

AB 12/4/17

*Remove Abandoned wells*

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #393768 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/01/2017 ()	
Name (Printed/Typed) SANDY BALLARD	Title ADMINISTRATIVE ASSISTANT
Signature (Electronic Submission)	Date 11/01/2017

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date NOV 29 2017
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 making a false statement to any Department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

**Additional data for EC transaction #393768 that would not fit on the form**

**32. Additional remarks, continued**

NUMBER OF WELLS TO FLARE: (26)

BURCH-KEELY UNIT #23 30-015-20417

~~BURCH-KEELY UNIT #24 30-015-20437~~

BURCH-KEELY UNIT #25 30-015-23168

BURCH-KEELY UNIT #27 30-015-04189

BURCH-KEELY UNIT #28 30-015-04188

BURCH-KEELY UNIT #257 30-015-29035

BURCH-KEELY UNIT #275 30-015-29774

BURCH-KEELY UNIT #297 30-015-30731

BURCH-KEELY UNIT #303 30-015-30789

BURCH-KEELY UNIT #329 30-015-32426

BURCH-KEELY UNIT #347 30-015-28090

BURCH-KEELY UNIT #351 30-015-32785

BURCH-KEELY UNIT #353 30-015-32787

BURCH-KEELY UNIT #382 30-015-33811

BURCH-KEELY UNIT #396 30-015-33810

BURCH-KEELY UNIT #404 30-015-35434

BURCH-KEELY UNIT #416 30-015-37128

BURCH-KEELY UNIT #570 30-015-40267

BURCH-KEELY UNIT #572 30-015-40268

BURCH-KEELY UNIT #573 30-015-40269

BURCH-KEELY UNIT #578 30-015-39539

BURCH-KEELY UNIT #582 30-015-40272

BURCH-KEELY UNIT #583 30-015-39540

BURCH-KEELY UNIT #585 30-015-40274

BURCH-KEELY UNIT #586 30-015-39908

BURCH-KEELY UNIT #941H (FKA 18-4H) 30-015-40971

*PSA'd*

Reason for flare: PLANNED MIDSTREAM CURTAILMENT. FRONTIER SHUT DOWN