

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.*

5. Lease Serial No. NMLC061842
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No. NMNM134918
8. Well Name and No. Multiple--See Attached
9. API Well No. Multiple--See Attached
10. Field and Pool or Exploratory Area MALJAMAR MALJAMAR-YESO, WEST
11. County or Parish, State LEA COUNTY, NM

**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	
2. Name of Operator COG OPERATING LLC	Contact: SARAH CHAPMAN E-Mail: SCHAPMAN@SPUREPLLC.COM
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 832-930-8502
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Multiple--See Attached	

**12. CHECK THE 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"/> 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	Successor of Operator
	<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.

This is notification of Change of Operator for the referenced Communitization Agreement, NMNM134918, which includes the following wells:  
FLAT HEAD FEDERAL COM 8H - 3002542375; FLAT HEAD FEDERAL COM 17H - 3002543224; FLAT HEAD FEDERAL COM 27H - 3002543147

Spur Energy Partners LLC, as new operator, accepts all applicable stipulations and restrictions concerning operations conducted on these leases or portion of leases described.

Bond Coverage: BLM Bond Number: NMB001783

Change of Operator Effective: 11/01/2019

OCD Accepted for Record 6/9/2020 - JAG

14. I hereby certify that the foregoing is true and correct.	
<b>Electronic Submission #512790 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 04/27/2020 (20PP2322SE)</b>	
Name (Printed/Typed) SARAH CHAPMAN	Title REGULATORY DIRECTOR
Signature (Electronic Submission)	Date 04/27/2020

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

Approved By <u>JENNIFER SANCHEZ</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>05/05/2020</u>
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 <u>Hobbs</u>

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.

(Instructions on page 2)

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

## Additional data for EC transaction #512790 that would not fit on the form

### Wells/Facilities, continued

Agreement	Lease	Well/Fac Name, Number	API Number	Location
NMLC061842	NMLC061842	FLAT HEAD FEDERAL COM 17H	30-025-43224-00-S1	Sec 14 T17S R32E NENE 1190FNL 1160FEL
NMLC061842	NMLC061842	FLAT HEAD FEDERAL COM 27H	30-025-43147-00-S1	Sec 14 T17S R32E NENE 1170FNL 990FEL
NMNM134918	NMLC061842	FLAT HEAD FEDERAL COM 8H	30-025-42375-00-S1	Sec 14 T17S R32E NENE 1170FNL 330FEL 32.838479 N Lat, 103.729068 W Lon

### 32. Additional remarks, continued

Former Operator: COG Operating LLC

## Revisions to Operator-Submitted EC Data for Sundry Notice #512790

	<b>Operator Submitted</b>	<b>BLM Revised (AFMSS)</b>
Sundry Type:	SUCCESS SR	SUCCESS NOI
Lease:	NMLC061842	NMLC061842
Agreement:	NMNM134918	NMNM134918 (NMNM134918)
Operator:	SPUR ENERGY PARTNERS LLC 920 MEMORIAL CITY WAY SUITE 1000 HOUSTON, TX 77024 Ph: 832-930-8502	COG OPERATING LLC ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 Ph: 432.685.4342
Admin Contact:	SARAH CHAPMAN REGULATORY DIRECTOR E-Mail: SCHAPMAN@SPUREPLLC.COM  Ph: 832-930-8502	SARAH CHAPMAN REGULATORY DIRECTOR E-Mail: SCHAPMAN@SPUREPLLC.COM  Ph: 832-930-8502
Tech Contact:	SARAH CHAPMAN REGULATORY DIRECTOR E-Mail: SCHAPMAN@SPUREPLLC.COM  Ph: 832-930-8502	SARAH CHAPMAN REGULATORY DIRECTOR E-Mail: SCHAPMAN@SPUREPLLC.COM  Ph: 832-930-8502
Location: State: County:	NM LEA	NM LEA
Field/Pool:	MALJAMAR	MALJAMAR MALJAMAR-YESO, WEST
Well/Facility:	FLAT HEAD FEDERAL COM 8 Sec 14 T17S R32E Mer NMP NENE 1170FNL 330FEL	FLAT HEAD FEDERAL COM 17H Sec 14 T17S R32E NENE 1190FNL 1160FEL  FLAT HEAD FEDERAL COM 27H Sec 14 T17S R32E NENE 1170FNL 990FEL FLAT HEAD FEDERAL COM 8H Sec 14 T17S R32E NENE 1170FNL 330FEL 32.838479 N Lat, 103.729068 W Lon