B SUNDRY Do not use th	UNITED STATES EPARTMENT OF THE INTE UREAU OF LAND MANAGEN NOTICES AND REPORTS is form for proposals to dril II. Use form 3160-3 (APD) fo	ERIOR MENT S ON WI	-enter an	20	OMB NC	APPROVED 0. 1004-0137 nuary 31, 2018	
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well ☑ Oil Well □ Gas Well □ Other					8. Well Name and No. BASEBALL CAP FEDERAL COM 705H		
2. Name of Operator Contact: AMANDA AVERY COG OPERATING LLC E-Mail: aavery@concho.com					9. API Well No. 30-025-45789-00-X1		
3a. Address ONE CONCHO CENTER 60 MIDLAND, TX 79701-4287	. (include area code) 8-6940						
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State			
Sec 25 T24S R34E SWSE 39 32.182182 N Lat, 103.422737			LEA COUNTY, N	M			
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA							
TYPE OF SUBMISSION	TYPE OF ACTION						
☑ Notice of Intent	□ Acidize	🗖 Dee	pen	Product	ion (Start/Resume)	□ Water Shut-Off	
_	Alter Casing	🗖 Hyd	raulic Fracturing	🗖 Reclam	ation	U Well Integrity	
Subsequent Report	Casing Repair	🗆 Nev	ew Construction 🔲 Reco		olete	□ Other	
Final Abandonment Notice	□ Change Plans	🗖 Plug	g and Abandon	Tempor	arily Abandon		
	Convert to Injection	🗖 Plug	g Back	🛛 Water I	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. Required information for disposal water:							
 Name of formation producing water on lease: Bone Spring Amount of water producing in barrels per day: 5000 bwpd How water is stored on lease: 2-750 BBL Fiberglass tank How water is moved to disposal: Piped/Trucked to nearest SWD System. 							
5) Disposal Facility #1 a) Facility Operator Name: Owl SWD Operating, LLC Water leaves COG well pad and is piped to an Owl SWD via trunk line.							
Disposal Facility #2			Accepted - NMOCD				
14. I hereby certify that the foregoing is true and correct. Electronic Submission #508333 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/24/2020 (20PP1792SE)							
Name(Printed/Typed) AMANDA AVERY			Title AUTHORIZED REPRESENTATIVE				
Signature (Electronic Submission)			Date 03/24/2020				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved By ACCEPTED				DEBORAH MCKINNEY TitleLEGAL INSTRUMENTS EXAMINER Date 03/30/2020			
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 Hobbs				
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 **							

Additional data for EC transaction #508333 that would not fit on the form

32. Additional remarks, continued

- a) Facility Operator Name: Delaware Energy LLC
 b) Name of facility or well name & number: Moomaw SWD #1 (SWD-1730)
 c) Type of facility or well: WDW
 d) Location by 1/4,1/4, Sec, T & R: N, Sec 25-T24S-R34E

In the event a temporary change of method or location of disposal is necessary, produced water will be trucked to an authorized disposal well in the geographic vicinity.

Revisions to Operator-Submitted EC Data for Sundry Notice #508333

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	DISPOSE NOI	DISPOSE NOI
Lease:	NMNM123530	NMNM123530
Agreement:		
Operator:	COG OPERATING LLC 2208 W MAIN STREET ARTESIA, NM 88210 Ph: 575-748-6940	COG OPERATING LLC ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 Ph: 432.685.4342
Admin Contact:	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com	AMANDA AVERY AUTHORIZED REPRESENTATIVE E-Mail: aavery@concho.com
	Ph: 575-748-6940	Ph: 575-748-6940
Tech Contact:	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com	AMANDA AVERY AUTHORIZED REPRESENTATIVE E-Mail: aavery@concho.com
	Ph: 575-748-6940	Ph: 575-748-6940
Location: State: County:	NM LEA	NM LEA
Field/Pool:	RED HILLS; BONE SPRING, N	WILDCAT BONE SPRING
Well/Facility:	BASEBALL CAP FEDERAL COM 705H Sec 25 T24S R34E Mer NMP SWSE 390FSL 2335FEL 32.182181 N Lat, 103.422734 W Lon	BASEBALL CAP FEDERAL COM 705H Sec 25 T24S R34E SWSE 390FSL 2335FEL 32.182182 N Lat, 103.422737 W Lon