Form 3160- 5 (August, 2007)

(Instructions on page 2)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD.	Hobba	1 3
	HOBBS	QCD

FORM APPROVED

OMB No. 1004-0137

Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELL
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MAR 2 6 2013 ase Serial No. NMNM120910

	not use this form for propo				- APII		ottee, or Tribe Name		
	doned well. Use Form 3160 TRIPLICATE - Other Ins			OSAIS.	RECEIV		Agreement Name a	ınd/or No.	
1. Type of Well	TRIFLICATE - Other ins	ucuo	ns on page 2.				,		
Oil Well Gas Well	Other					8. Well Name a	nd No.		
2. Name of Operator							ntail 3 Federa	l#1H	
COG Production LLC	1		of Di Ali Cal			9. API Well No			/
3a. Address 2208 W. Main Street			3b. Phone No. (include area code)			30-025-40684			
Artesia, NM 88210			575-748-6946			10. Field and Pool, or Exploratory Area Upper			
4. Location of Well (Footage, Sec., T., R.,				Lat.			<del>305 S263208P</del>	; Bone Sp	ring 4
SHL: 260' FSL & 2290' FEL	. , ,			Long.		11. County or P	•	212.4	/
BHL: 334' FNL & 2308' FEL				DT OD OT	urn n	Lea	<u> </u>	NM	
12. CHECK APPROPRIATE BOX	(S) TO INDICATE NATU	KE OF				AIA			
TYPE OF SUBMISSION			1)	YPE OF AC	HON				
Notice of Intent	Acidize		Deepen	Produ	action (Sta	art/ Resume)	Water Shut	-off	
	Altering Casing		Fracture Treat	Recla	unation		Well Integr	ity	
X Subsequent Report	Casing Repair		New Construction	Reco	mplete		X Other		
	Change Plans		Plug and abandon	Temp	orarily Ab	oandon	Drill Out &	Connect to	Sales
Final Abandonment Notice	Convert to Injection		Plug back	Wate	r Disposal				•
1/31/13 to 2/6/13 MIRU We Place well on gas lift system 2/23/13 1st date of sales.			cclean. Set 2 7/	'8" 6.5# L-	ACI	CEPTED MAR	r set @ 8857'.  FOR RE  2 3 2013  AND MANAGE		
						CARLS3A	D FIELD OFFI		<u> </u>
14. I hereby certify that the foregoing is true Name (Printed/ Typed)	e and correct.		1						
Stormi Davis			Title: Reg	ulatory An	alyst				
Signature:	7	Date: 2/26/13			and the state of t				
	THIS SPACE F	OR FE			CE US	E .			
			T Pe	etroleum	Engin	eer.	ate: APK	102	013
Approved by:  Conditions of approval, if any are attack			arrant or	c.		1 2  Di	ate: F\ 1\	<u>45, W 2</u>	
certify that the applicant holds legal or which would entitle the app	olicant to conduct opera	tions	thereon.				<del></del>		
Title 18 U.S.C. Section 1001 AND Tit States any false, fictitious or fraudulent statem				n knowingly	and willfu	illy to make any	department or as	gency of the	United