

HOEBS OCD

OCD Hobbs

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010JUL 01 2013
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.
JUL 01 2013

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SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC029405B
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: KANICIA CASTILLO E-Mail: kcastillo@conchoresources.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address ONE CONCHO CENTER 600 W. ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4332	8. Well Name and No. GC FEDERAL 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 19 T17S R32E Mer NMP 2225FSL 2406FEL		9. API Well No. 30-025-35814
		10. Field and Pool, or Exploratory MALJAMAR
		11. County or Parish, and State LEA COUNTY, NM

12. CHECK 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"/> Fracture Treat	<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 recompleat 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

COG Operating LLC, respectfully request to flare at the GC/BC Compressor Station. Located at: Unit L, Sec 19, T17S, R32E.

Number of wells to flare: (31)
Please see attachment for API #'s

3,000 MCF

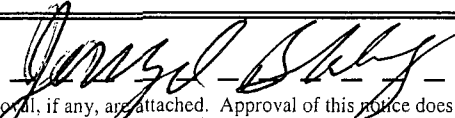
Requesting to flare from 5/13/13 to 11/13/13.

Due to DCP high line pressure.

SEE ATTACHED FOR
CONDITIONS OF APPROVALSUBJECT TO LIKE
APPROVAL BY STATE

14. I hereby certify that the foregoing is true and correct. Electronic Submission #207339 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JOHNNY DICKERSON on 05/14/2013 ()	
Name (Printed/Typed) KANICIA CASTILLO	Title PREPARER
Signature (Electronic Submission)	Date 05/13/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By 	Title	APPROVED JUN 27 2013	Date
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 47 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to falsify or to make and to submit to any agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.			

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

JUL 08 2013

Additional data for EC transaction #207339 that would not fit on the form

32. Additional remarks, continued

Schematic attached.

Battery Name

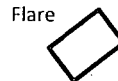
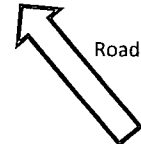
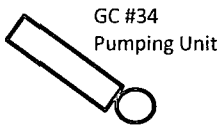
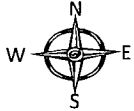
Well #	API Number
BC #10 Battery	
9	30-025-36769
10	30-025-37021
11	30-025-36998
12	30-025-37869
13	30-025-38164
16	30-025-38724
17	30-025-40246
18	30-025-38725
19	30-025-38837
20	30-025-38904
21	30-025-38726
34	30-025-39607
35	30-025-39021
37	30-025-39358
38	30-025-39299
39	30-025-39290
45	30-025-39419
47	30-025-39543
48	30-025-39496
51	30-025-39469
52	30-025-39624
GC # 1 Battery	
1	30-025-35814
4	30-025-35935
5	30-025-36999
7	30-025-38737
8	30-025-38842
12	30-025-39086
34	30-025-39420
35	30-025-39421
50	30-025-39613
53	30-025-40137
57	30-025-40238
59	30-025-40160
61	30-025-40227
GC #11 Battery	
10	30-025-38993
11	30-025-38994
13	30-025-39109
14	30-025-39110
15	30-025-39111
16	30-025-39112
18	30-025-39113

19	30-025-39162
26	30-025-39282
30	30-025-39272
41	30-025-39472
49	30-025-39422
51	30-025-40005
52	30-025-40006
54	30-025-39498
55	30-025-40007
56	30-025-39474
58	30-025-40151

Flare Request Form

Battery-	BC / GC Compressor Station		
Production-	3,000 MCF		
Total BTU of Htrs-	No heaters		
Flare Start Date-	5/13/2013	Flare End Date-	11/13/2013
UL Sec-T-R-	Unit L, Sec.19-T17S-R32E	GPS-	32.818333 / -103.812117
# of wells in bty-	52	# of wells to be flared-	52
Reason For Flare-	DCP high line pressure		

Site Diagram



BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972

6/27/2013

Condition of Approval to Flare Gas

1. Report all volumes on OGOR reports.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. **Flared volumes will still require payment of royalties**
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days for date of approval.
9. Submit Subsequent Report with actual volumes of gas flared for each month gas is flared.
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JDB6272013