

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.***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. NMNM0315712
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: ROBYN ODOM E-Mail: rododm@conchoresources.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 432-685-4385	8. Well Name and No. BRANEX-COG FEDERAL 12
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 9 T17S R32E NESW 1560FSL 1760FWL		9. API Well No. 30-025-40979-00-S1
		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 type="checkbox"/> Notice of Intent	<input checked="" 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"/> 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recompleat 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.)

3/27/13 Test 5-1/2" BOP to 3500psi, 35 min. ok.  
3/31/13 Perf Lower Blinbry @ 6520-6720 w/1SPF, 26 holes.  
4/01/13 Acidize w/2,000 gals acid. Frac w/142,575 gals gel, 150,056# 16/30 white sand, 28,710#  
16/30 Siberprop. Set CBP @ 6460. Perf Middle Blinbry @ 6220-6420 w/1SPF, 26 holes. Acidize w/2,000  
gals acid. Frac w/133,125 gals gel, 146,537# 16/30 white sand, 29,437# 16/30 Siberprop. Set CBP @  
6160. Perf Upper Blinbry @ 5920-6120 w/1SPF, 26 holes. Acidize w/2,000 gals acid. Frac w/133,843  
gals gel, 146,152# 16/30 white sand, 30,493# Siberprop. Set CBP @ 5800. Perf Paddock @ 5500-5780  
w/1SPF, 26 holes. Acidize w/2,000 gals acid.  
4/02/13 Frac Paddock w/108,558 gals gel, 109,350# 16/30 white sand, 18,558# Siberprop.  
4/08/13 Drill out plugs. Clean out to PBTD 6940.  
4/11/13 RIH w/166jts 2-7/8" 6.5# J55 tbi, EOT @ 5659. RIH w/2-1/2x1-1/2x20 pump. Hang on well.

HOBBS OCD

AUG 20 2013

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14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #216721 verified by the BLM Well Information System</b> <b>For COG OPERATING LLC, sent to the Hobbs</b> <b>Committed to AFMSS for processing by JOHNNY DICKERSON on 08/15/2013 (13JLD0565SE)</b>	
Name (Printed/Typed) ROBYN ODOM	Title PERSON RESPONSIBLE
Signature (Electronic Submission)	Date 08/12/2013

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISORY EPS	Date 08/17/2013
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.

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

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