

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OGD

FORM 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.

DEC 24 2015
RECEIVED

5. Lease Serial No.
NMLC063645

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
SCOOTER FEDERAL COM 2H

9. API Well No.
30-025-42788-00-X1

10. Field and Pool, or Exploratory
CORBIN

11. County or Parish, and State
LEA COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
COG PRODUCTION LLC
Contact: STORMI DAVIS
E-Mail: sdavis@concho.com

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6946
Fx: 575-748-6950

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 23 T18S R33E NENW 190FNL 1650FWL

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 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 checked="" type="checkbox"/> Other Drilling Operations |
| | <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.)

9/27/15 Spud well.

9/29/15 TD 17 1/2" hole @ 1650'. Set 13 3/8" 54.5# J-55 csg @ 1650'. Cmt w/1300 sx Class C. Tailed in w/250 sx. Circ 261 sx to surface. WOC 18 hrs. Test csg to 1000#. Drilled out 5' below FS w/10# brine - no loss of circ.

10/1/15 TD 12 1/4" hole @ 3125'. Set 9 5/8" 40# J-55 csg @ 3125'. Cmt w/700 sx Class C. Tailed in w/250 sx. Circ 284 sx to surface. WOC 18 hrs. Test csg to 1000#. Drilled out 5' below FS w/10# brine - no loss of circ.

10/17/15 TD 8 3/4" lateral @ 14139' (KOP @ 9025'). Set 5 1/2" 17# P-110 csg @ 14139'. Cmt w/1250 sx Class H. Tailed in w/1400 sx. Circ 240 sx to surface.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #321563 verified by the BLM Well Information System For COG PRODUCTION LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/30/2015 (16JAS088SE)

Name (Printed/Typed) STORMI DAVIS Title REGULATORY ANALYST

Signature (Electronic Submission) Date 10/27/2015

RECEIVED FOR RECORD
NOV 9 2015
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE
K2

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date _____

Office _____

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.

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 ****

JAN 07 2016

Additional data for EC transaction #321563 that would not fit on the form

32. Additional remarks, continued

10/19/15 Rig released.