

HOBBS OCD

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

Hobbs

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

APR 05 2016

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.

RECEIVED

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. NMLC029509B
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: CHASITY JACKSON E-Mail: cjackson@concho.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: 432-686-3087	8. Well Name and No. IVAR THE BONELESS FEDERAL 22H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T17S R32E NENW 105FNL 1423FWL		9. API Well No. 30-025-42998-00-X1
		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 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 Well Spud
	<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 recompleate 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 recompleation 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.)

1/28/16 Spud 17-1/2 @ 2AM.

1/29/16 TD 17-1/2 @ 907. Ran 21jts 13-3/8 J55 54.5# @ 907. Cmt w/275sx C. lead, 375sx C. tail. PD @ 10:36PM. Circ 106sx. WOC 18hrs. Test BOP to 2000# for 30min, ok.

1/31/16 TD 12-1/4 @ 2171. Ran 51jts 9-5/8 J55 40# @ 2171. Cmt w/350sx C. lead, 300sx C. tail. PD @ 6:12PM. Circ 145sx. WOC 18hrs. Test BOP to 2000# for 30 min, ok.

2/1/16 TD 8-3/4 vert sec @ 2206. TD 8-1/2 vert KOP tangent @ 2310.

2/3/16 Kick off 8-1/2 curve @ 5751.

2/5/16 TD 8-1/2 curve @ 7014. Drill 8-1/2 lat 7014 - 11,140.

2/11/16 TD 8-1/2 lateral @ 11,140MD, 6251TVD. Ran 128jts 7" 29# L80 XO @ 5764, 122jts 5-1/2 17# L80 @ 11,140.

2/12/16 Cmt w/500sx C. w/adds lead, 2000sx C. w/adds tail. PD @ 2:10AM. Circ 500sx. WOC 24hrs. RR.

intermediate was approved for;
4875.
was 2171'
or verbal approval?

14. I hereby certify that the foregoing is true and correct. Electronic Submission #332237 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/04/2016 (16PP0380SE)	
Name (Printed/Typed) CHASITY JACKSON	Title PREPARER
Signature (Electronic Submission)	Date 02/25/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	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 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 **