UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

NMNM01059

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	Lease Serial No.
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Do not use this	form for	propo	sals to drill	or to	re-enter an	1 >
abandanad wall						

6. If Indian, Allottee or Tribe Name abandoned well. Use form 3160-3 If Unit or CA/Agreement, Name and/or No. NMNM114181 SUBMIT IN TRIPLICATE - Other instructions on page 2 Well Name and No. BANDIT 15 FEDERAL COM 2 1. Type of Well Oil Well Gas Well Other AMANDA AVERY API Well No. Name of Operator Contact: COG OPERATING LLC 30-025-37231 E-Mail: aavery@concho.com 3a. Address 3b. Phone No. (include area code) 10. Field and Pool or Exploratory Area 2208 W MAIN STREET Ph: 575-748-6940 TEAS; WOLFCAMP ARTESIA, NM 88210 4. Location of Well . (Footage, Sec., T., R., M., or Survey Description) 11. County or Parish, State Sec 15 T20S R33E 1980FSL 1980FEL LEA COUNTY, NM 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION ☐ Production (Start/Resume) ☐ Water Shut-Off ☐ Acidize □ Deepen ☐ Notice of Intent ☐ Alter Casing ☐ Hydraulic Fracturing □ Reclamation ☐ Well Integrity Subsequent Report Casing Repair ☐ New Construction ☐ Recomplete □ Other ☐ Final Abandonment Notice ☐ Change Plans ☐ Plug and Abandon ☐ Temporarily Abandon Convert to Injection ☐ Plug Back 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 recomplete 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection. SEE ATTACHED FOR CONDITIONS OF APPROVAL APPRO Required Information for the Disposal of Produced Water 1) Name of formation producing water on lease: Teas; Penn (Gas) Amount of water produced in barrels per day: 10 BWPD How water is stored on lease: 1-500 BBL Tanks 4) How water is moved to disposal facility: Trucked MAR 3 2017 Disposal Facility #1 5) a)Facility Operator Name: COG Operating LLC b)Name of facility / well name and number: Wild Cobra 1 State SWD #2 (Order # SWD-1525) JAMES A. AMOS c)Type of facility of well: WDW SUPERVISOR-EPS d)Location by 1/4,1/4, Section, Township & Range: NENW, Sec 1-T19S-R34E 14. I hereby certify that the foregoing is true and correct Electronic Submission #366711 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by DEBORAH MCKINNEY on 02/13/2017 () Name (Printed/Typed) AMANDA AVERY **AUTHORIZED REPRESENTATIVE** Signature (Electronic Submission) 02/10/2017

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.

Approval of this notice does not warrant or

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Title

Office

Conditions of approval, if any, are attached

certify that the applicant holds legal or equitable title to those rights in the subject lease

Approved By

Additional data for EC transaction #366711 that would not fit on the form

32. Additional remarks, continued

Disposal Facility #2
a)Facility Operator Name: COG Operating LLC
b)Name of facility/ well name and number: Magnum Pronto 32 State SWD #1
(Order # SWD-1399-A)
c)Type of facility of well: WDW
d)Location by1/4,1/4, Section, Township & Range: NESW, Sec 32-T19S-R32E

BUREAU OF LAND MANAGEMENT

Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

Disposal of Produced Water From Federal Wells Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

- 1. This agency shall be notified of any change in your method or location of disposal.
- 2. Compliance with all provisions of Onshore Order No. 7.
- 3. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- 5. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
- 6. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
- 7. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
- 8. Disposal at any other site will require prior approval.
- 9. Subject to like approval by NMOCD.

7/10/14