

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOC
HOBBS OGD
HobbsFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.*5. Lease Serial No.
NMNM17440

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. TENDERLOIN FEDERAL COM 4H
2. Name of Operator COG OPERATING LLC		9. API Well No. 30-025-43891
3a. Address 2208 WEST MAIN ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946	10. Field and Pool or Exploratory Area GRAMA RIDGE; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 12 T22S R33E Mer NMP SWSW 655FSL 660FWL		11. County or Parish, State LEA COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 must 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 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.

10/1/17 Spud well.

10/2/17 TD 17 1/2" hole @ 1610'. Set 13 3/8" 54.5 J-55 csg @ 1610'. Cmt w/980 sx Class C. Tailed in w/260 sx. Circ 392 sx to surface. WOC 18 hrs. Test csg to 1500# for 30 mins.

10/6/17 TD 12 1/4" hole @ 5250'. Set 9 5/8" 40# L-80 csg @ 5250'. Set DVT @ 3545'. Cmt Stage 1 w/460 sx Class C. Tailed in w/250 sx. Circ 284 sx off DVT. Cmt Stage 2 w/1245 sx Class C. Tailed in w/200 sx. Circ 163 sx to surface. WOC 18 hrs. Test csg to 1500# for 30 mins.

10/26/17 TD 8 3/4" lateral @ 20785' (KOP @ 10339'). Set 5 1/2" 17# P-110 csg @ 20785'. Cmt w/1185 sx Class C and tailed in w/2345 sx. Circ 360 sx to surface.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #394169 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/07/2017 ()	
Name (Printed/Typed) STORMI DAVIS	Title PREPARER
Signature (Electronic Submission)	Date 11/07/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date NOV 7 2017
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.

(Instructions on page 2)

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

K2

Additional data for EC transaction #394169 that would not fit on the form

32. Additional remarks, continued

10/29/17 Released rig.