Form 3160-5 (June 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter 40 BBS OC abandoned well. Use form 3160-3 (APD) for such proposals.				FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM120908 3. If Indian, Allottee or Tribe Name	
SUBMIT IN	TRIPLICATE - Other inst	tructions on page 2 JAN	1 6 2018	7. If Unit or CA/Agree	ement, Name and/or No.
1. Type of Well ☑ Oil Well □ Gas Well □ Other				8. Well Name and No. WINDWARD FED 11H	
2. Name of Operator COG OPERATING LLC				9. API Well No. 30-025-43707	
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210				10. Field and Pool or Exploratory Area WC025G06S253206M BS	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 30 T24S R32E NENE 210FNL 560FEL 32.195061 N Lat, 103.707047 W Lon				11. County or Parish, State LEA COUNTY, NM	
12. CHECK THE A	PPROPRIATE BOX(ES)	TO INDICATE NATURE C	F NOTICE,	REPORT, OR OTH	IER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
 Notice of Intent Subsequent Report 	AcidizeAlter Casing	DeepenHydraulic Fracturing	ProductReclam	ion (Start/Resume) ation	Water Shut-OffWell Integrity
☐ Final Abandonment Notice	Casing Repair	New Construction Plug and Abandon	Recomp	arily Abandon	Other Venting and/or Flari
	Convert to Injection	Plug Back	Water I	2	ng
 Describe Proposed or Completed Op If the proposal is to deepen direction Attach the Bond under which the wi following completion of the involve testing has been completed. Final A determined that the site is ready for ACTUAL GAS FLARED AT T NOI SUBMISSION #387597 WELLS: WINDWARD FED 10H: 30-00 WINDWARD FED 11H: 30-00 WINDWARD FED 12H: 30-00 SEPTEMBER: 3303 MCF 	hally or recomplete horizontally, ork will be performed or provide d operations. If the operation re- bandonment Notices must be fil- final inspection. THE WINDWARD FED 111- 25-43567	give subsurface locations and meas the Bond No. on file with BLM/BL sults in a multiple completion or rec ed only after all requirements, inclu-	ared and true ve A. Required sul completion in a r	ertical depths of all pertin bsequent reports must be new interval, a Form 316	ent markers and zones. filed within 30 days 0-4 must be filed once
OCTOBER: 16812 MCF			\bigcap		
14. I hereby certify that the foregoing is true and correct. Electronic Submission #398680 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 12/20/2017 () Name (Printed/Typed) CATHY SEELY Title ENGINEERING TECH					
Signature (Electronic	Submission)	Date 12/20/2		D FOR RECON	RD
THIS SPACE FOR FEDERAL OR STATE OFFICE USE 5 2018					
Approved By					
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 ** Accepted for Record Only MLB/OCD 1/18/2018					

Additional data for EC transaction #398680 that would not fit on the form

32. Additional remarks, continued

NOVEMBER: 5568 MCF

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