| Form 3160-5 (June 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT | | | | | FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 | |
|---|---------------------------------------|--|------------------------|-----------------------------|---|----------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS | | | | | 5. Lease Serial No. NMNM119759 | |
| Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. Hobbs | | | | | 6. If Indian, Allottee | or Tribe Name |
| SUBMIT IN TRIPLICATE - Other instructions on page 2 | | | | | 7. If Unit or CA/Agr | reement, Name and/or No. |
| 1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Other | | | | | 8. Well Name and No. BLUE JAY FEDERAL 1H | |
| 2. Name of Operator Contact: CATHY SEELY COG OPERATING LLC E-Mail: cseely@concho.com | | | | | 9. API Well No. 30-025-42338 | |
| 3a. Address 2208 W MAIN STREET ARTESIA, NM 88210 | | 3b. Phone No. (include area code) Ph: 575-748-1549 | | | 10. Field and Pool or Exploratory Area WC025G08S203506D BS | |
| 4. Location of Well (Footage, Sec., T |) | | | 11. County or Parish, State | | |
| Sec 18 T20S R35E SWSE 19 32.566295 N Lat, 103.495039 | | | LEA COUNTY, NM | | | |
| 12. CHECK THE AI | PPROPRIATE BOX(ES) | TO INDICA | TE NATURE OI | F NOTICE, | REPORT, OR OT | HER DATA |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | | |
| □ Notice of Intent □ Acidize | | ☐ Deepen | | ☐ Production (Start/Resume) | | ☐ Water Shut-Off |
| _ | ☐ Alter Casing | | ☐ Hydraulic Fracturing | | ation | ☐ Well Integrity |
| Subsequent Report ■ Subsequent Report ■ ■ Subsequent Report ■ | Cashig Repair | | ■ New Construction | | olete | Other Venting and/or Flari |
| ☐ Final Abandonment Notice | ☐ Change Plans ☐ Convert to Injection | ☐ Plug and Abandon | | ☐ Temporarily Abandon | | ng |
| | Plug Back Water I | | | 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. | | | | | | |
| ACTUAL GAS FLARED AT THE BLUE JAY FED 1H BTY FROM 7/18/17 TO 10/16/17. NOI SUBMISSION #381611 | | | | | | |
| WELLS: BLUE JAY FED COM 2H: 30-025-43533 BLUE JAY FED 1H: 30-025-42338 | | | | | | |
| JULY: 0 | | | | | | |
| AUGUST: 0 | | | | | | |
| SEPTEMBER: 0 | | | | | | |
| 14. I hereby certify that the foregoing is true and correct. | | | | | | |
| Electronic Submission #397136 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 12/18/2017 () Name (Printed/Typed) CATHY SEELY Title ENGINEERING TECH | | | | | | |
| Signature (Electronic | | Date 12/06/2017 ACCEPTED FO | | | RECORD | |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE | | | | | | |
| | | | Ī | + | FEB 8/20 | 018 |
| Approved By | | Title | 11-/1 | 1 | /Date | |
| Conditions of approval, if any, are attache certify that the applicant holds legal or eq which would entitle the applicant to condition | e subject lease | Office | | CARLSBAD FIELD | AGEMENT. | |
| 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 ** | | | | | | |

Accepted for Record

MUB/OCD 2/19/2018