

Form 3160-5 (June 2015)

INITED STATES BUREAU OF LAND MANAGEMENT

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

DEPARTMENT OF THE INTERIOR 5. Lease Serial No. NMNM114987 SUNDRY NOTICES AND REPORTS ON WELLS O Hobbs Do not use this form for proposals to drill or to re-enter abandoned well. Use form 3160-3 (APD) for such proposals. 6. If Indian, Allottee or Tribe Name If Unit or CA/Agreement, Name and/or No. NMNM138694 — SUBMIT IN TRIPLICATE - Other instructions or page 8. Well Name and No. DOMINATOR 25 FEDERAL COM 602H Type of Well Oil Well Gas Well Other Name of Operator
COG OPERATING LLC AMANDA AVE API Well No. Contact: 30-025-44815-00-X1 E-Mail: aavery@concho.com 10. Field and Pool or Exploratory Area WC-025 G-08 S203435D-WOLFCAMP 3b. Phone No. (include area code) 3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 Ph: 575-748-6940 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 11. County or Parish, State Sec 25 T25S R33E SESE 280FSL 660FEL LEA COUNTY, NM 32.095032 N Lat, 103.519661 W Lon 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION ■ Water Shut-Off □ Production (Start/Resume) Acidize Deepen Notice of Intent ■ Well Integrity ■ Alter Casing ☐ Hydraulic Fracturing □ Reclamation □ Subsequent Report Casing Repair ■ New Construction □ Recomplete Other □ Plug and Abandon ☐ Temporarily Abandon ☐ Final Abandonment Notice Change Plans ☐ 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. Required information for disposal water:

1) Name of formation producing water on lease: Wolfcamp-2) Amount of water producing in barrels per day: 500 bwpd
3) How water is stored on lease: 2-500 BBL Fiberglass tank 4) How water is moved to disposal: Piped to nearest SWD System. 5) Disposal Facility #1 Facility Operator Name: Owl SWD, LLC b) Name of facility or well name & number: Maralo Sholes B #2 (SWD-1127) c) Type of facility or well: WDW d) Location by 1/4,1/4, Sec, T & R: NESW, Sec 36-T25S-R36E Disposal Facility #2 a) Facility Operator Name: BC&D Operating Inc. 14. I hereby certify that the foregoing is true and correct Electronic Submission #461907 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 04/18/2019 (19PP1608SE) **AUTHORIZED REPRESENTATIVE** Name (Printed/Typed) AMANDA AVERY FOR RECORD (Electronic Submission) Date 04/1 Signature THIS SPACE FOR FEDERAL OR STA TE OFFICE USE Date Title Approved By 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. BUREAU OF LAND MANAGEMENT

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.

Office

CARLSBAD FIELD OFFICE

Additional data for EC transaction #461907 that would not fit on the form

32. Additional remarks, continued

b) Name of facility or well name & number: West Jal B #1 (SWD 1601) c) Type of facility or well: WDW d) Location by 1/4,1/4, Sec, T & R: Unit J Sec 17-T25S-R36E Disposal Facility #3 e) Facility Operator Name: BC&D Operating Inc f) Name of facility or well name & number: West Jal B Deep Well #1 (SWD 1482) g) Type of facility or well: WDW h) Location by 1/4,1/4, Sec, T & R: Unit H Sec 17-T25S-R36E

In the event a temporary change of method or location of disposal is necessary, produced water will be trucked to an authorized disposal well in the geographic vicinity.