

NITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

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

| 5. | Lease Serial No. |
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| | NMNM114987 |

| SUNDRY NOTICES AND REPORTS ON WELLS Och Hobbs Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. | | | | | | NMNM114987 6. If Indian, Allottee or Tribe Name | | | |
|--|--|---|---|------------|-------------------|--|-------|--|--|
| SUBMIT IN | OCD | 7. If Unit or CA/Agreement, Name and/or No. NMNM138694 | | | | | | | |
| 1. Type of Well | ' | 8. Well Name and No. | | | | | | | |
| Oil Well Gas Well Oth | DOMINATOR 25 | FEDE | RAL COM 701H | | | | | | |
| 2. Name of Operator COG OPERATING LLC | 9. API Well No. 30-025-44744-00-X1 | | | | | | | | |
| 3a. Address ONE CONCHO CENTER 60 MIDLAND, TX 79701-4287 | include 6940 | EIVED | 10. Field and Pool or Exploratory Area WILDCAT;WOLFCAMP | | | | | | |
| 4. Location of Well (Footage, Sec., T | | | 11. County or Parish | , State | <u>,</u> | | | | |
| Sec 25 T25S R33E SESE 280 32.095032 N Lat, 103.519463 | | | LEA COUNTY, | , NM | | | | | |
| 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | | | | | | | | |
| TYPE OF SUBMISSION | F ACTION | | | | | | | | |
| Notice of Intent | ☐ Acidize | □ Deepe | n Production (Start/Resume) | | on (Start/Resume) | ☐ Water Shut-Off | | | |
| | Alter Casing | ☐ Hydra | draulic Fracturing | | tion | ☐ Well Integrity | | | |
| ☐ Subsequent Report | Casing Repair | ☐ New | Construction | nstruction | | | Other | | |
| ☐ Final Abandonment Notice | □ Change Plans | Plug a | lug and Abandon 🔲 Ter | | rily Abandon | | | | |
| | Convert to Injection | Plug l | Back | Water D | isposal | | | | |
| 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 a) Facility Operator Name: Owl SWD, LLC b) Name of facility or well: mame & 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 Pacility Operator Name: BC&D Operating Inc. | | | | | | | | | |
| 14. I hereby certify that the foregoing is true and correct. Electronic Submission #459508 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/28/2019 (19PP1473SE) | | | | | | | | | |
| Name (Printed/Typed) AMANDA | | | RESENTATIVE | | | | | | |
| Signature (Electronic S | Submission) | | ACCEPTED FOR RECORD | | | | | | |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE | | | | | | | | | |
| Approved By Conditions of approval, if any, are attache certify that the applicant holds legal or equ | Title | BUREAU OF L | AND MANAGEMEN | | Date | | | | |
| which would entitle the applicant to condu | Office | CHULOBA | D FIELD 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) ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **



Additional data for EC transaction #459508 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.