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 proposal OCD Holds. SUBMIT IN TRIPLICATE - Other Instructions on page 2 NUMMIT IN TRIPLICATE - Other Instructions on page 2 SUBMIT IN TRIPLICATE - Other Instructions on page 2 1. Type of Well B Oil Well Other 2 Name of Operator COG OPERATING LLC Contact: AMANDA AV 2 Name of Operator COG OPERATING LLC Contact: AMANDA AV 3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 3b. Phone No. (include area code) Ph: 575-748-6940 4. Location of Well (Footage, Sec., T. R. M., or Survey Description) 11. County or Parish, State Sec 33 T2OS R34E SWSE 696FSL 2137FEL 32.524239 N Lat, 103.563576 W Lon TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF SUBMISSION OT Notice of Intent	(June 2015) D	DEPARTMENT OF THE INTERIOR			FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM083	
Do not use this form for proposals to drill or to re-enter an abundle of the second proposal by the proproduce by the proposal by the proposal by the producing by the pr	BUREAU OF LAND MANAGEMENT			5. Lease Serial No.		
SUBMIT IN TRIPLICATE - Other Instructions on page 2"DS OCD 7. If Unit or CA/Agreement, Name and/or 1. Type of Well B0 Well Case Well Could 8 Well Name and Name 2. Manuar of Operator Context: AMANDA AVERCEIVED 9. API Wells and Name 2. Manuar of Operator Context: AMANDA AVERCEIVED 9. API Wells and Name 2. Manuar of Operator Context: AMANDA AVERCEIVED 9. API Wells and Name 2. Manuar of Operator Context: AMANDA AVERCEIVED 9. API Wells and Name 2. Manuar of Operator S. Address 9. API Wells Operator 9. API Wells Operator COG OPERATING LLC E-Mail: BarwyDecorphone 9. API Wells Operator 9. API Wells Operator 3. Address Context OPErator 9. API Wells Operator 10. Field and Pol to Exploringly Area MIDLAND, TX. 79701-4287 II. Country or Parink 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 II. Country or Parink State IEA Colize Deepen Production (Start/Resume) Water State- B Subsequent Report C Atacta of Well operator Context on the production (Start/Resume) Water State- B Subsequent Report C Atacta of W	Do not use ti	his form for proposals to d	rill or to re-enter an	6 If Indian Allotte		
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3a. Address. ONE CONCHO CENTER 600 WILLINOIS AVENUE IP: First 575-748-6940 10 First and pool of Explanancy Area. WILLCAT, WOLFCAMP, Area. WILLCAT, YOUF, Area. WILLCAT, YOUF, Area. WILLCAT, YOUF, Area. WILLCAT, WOLFCAMP,	🔀 Oil Well 🔲 Gas Well 🔲 O)ther				
ONE CONCHO CENTER 600 WILLINGS AVENUE Ph: 575-748-6940 WILDCAT;WOLFCAMP 4. Locaton of Well (Poorage, Sec. T. R. M. or Survey Decreption) 11. County or Parish, State 3c 254230 NULLINGS SOFTW Lon LEA COUNTY, NM 21. CAECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Acidize Deepen Ontice of Intent Acidize Deepen Charles Report Charles Report Other Charles Report Charles Report Other Charles Report Charles Report Other In Bahadonment Notice Convert to Injection Plug and Abandon Temporarily Abandon 13. Describe Proposed or Completed Operations. (Clarry state all pertited teatilis, including estimated starting date of any proposed work and approximate duration the triffle to proposed or the anytown determines. In a bandonent Notice in the operation results in a multiple completion on the witherval, a form 316/4 must be filed on target SWD date in the operation state within a multiple completion on the eventerial depti or all must be filed on target SWD date in a multiple completion on the witherval, a form 316/6 H must be filed on target SWD MDY date is moved to classes: Bone Spring AUG - 6 2019 14. I hereby certify that the foregoing is true and correct. Electronic Subread Astasts Art SP3 vertified by the BLM W	2. Name of Operator COG OPERATING LLC	Contact: A E-Mail: aavery@con		50 9. API Well No. 30-025-4510	3-00-X1	
Sec 33 T20S R34E SWSE 696FSL 2137FEL 32.524233N Lat, 103.563576 W1.07 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Acidize Deepen Production (Sart/Resume) Water Shu-L Subsequent Report Change Plans New Construction Reclamation Well Integril Gaing Repair New Construction Plug and Abandon Temporarily Abandon Other 13. Describe Proposed or Completed Operation: Charty rate all pertoane details, including estimated stating date of any proposed work and approximate duration them the file within 10 days first bard and mark with a be file of within 10 days first bard abandonment Notice Image: Subsequent Report Change Plans Plug Back Water Disposal 13. Describe Proposed or Completed Operation: Charty ate all pertoane details, including estimated stating date or any proposed work and approximate duration them to find which 10 days first bard bandonment Notice is use bield on gains at the Bad No. of file work ball MDH ALAGEMENT Charge at the file on the Bad No. of file work with the file organization and the with the stating date of find lange of the Bad No. of file work BLAW ALA Required information for disposal water: New of formation producing water on lease: StoD Byod Atternet StoD System For CoC OPERATIC LC, Sec 1721S-R33E 1) Name of formation producing water on lease: Bone Spring AUG = 6 2019 DEEAD To	ONE CONCHO CENTER 6	00 W ILLINOIS AVENUE		10. Field and Pool WILDCAT;W	or Exploratory Area OLFCAMP	
32.524239 N Lat, 103.563576 W Lon 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION IVPE OF ACTION Notice of Intent Activities Deepen Production (Star/Resume) Water Shurt- Subsequent Report Casing Repair New Construction Reclamation Water Shurt- Final Abandonment Notice Casing Repair New Construction Reclamation Water Shurt- 13. Describe Proposed or Completed Operation: Clearly state all peritered ad Abandon Temporarily Abandon Convert to Injection Plug Back Water Disposal 13. Describe Proposed or Completed Operation: Clearly state all peritered testings including estimated stating date of any proposed work and approximate duration there if the proposed work and approximate duration there if the proposed work and approximate duration there is need of one stating and and event Notices must be filed only after within 20 days 13. Describe Proposed or Completed Operation: Clearly state all peritered test is need of one states: Bone Spring Name of Committee on provide the Bood No, on file with BL/M2LA. Required antoposed work and approximate duration there are done test within 20 days Active test of the Spring Proposed or Completed operations: Clearly test is invected to the state operation of the propesetis inveced to the state state operation provide the Bo	4. Location of Well (Footage, Sec.,	T., R., M., or Survey Description)				
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□ Notice of Intent □ Alter Casing □ Hydraulic Fracturing □ Recomplete □ Other □ Subsequent Report □ Casing Repair □ New Construction □ Recomplete □ Other □ Change Plans □ Plug and Abandon □ Temporarily Abandon □ Convert to Injection □ Plug Back ③ Water Disposal 13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration ther If the proposal is to deepen directionality or recomplete horizontally, give subsurface locations and messurd and two vertical depths of all pertinent maters and zon at the work will be performed or provide the Bond No on fire wills BL/BAR. Negurent Poyror marks in Bind within 10 days fresting 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: Bone Spring	TYPE OF SUBMISSION		TYPE OF	ACTION	· · · · · · · · · · · · · · · · · · ·	
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13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration there if the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zon Attach the Boda under which the work with the performed to provide the Boda No. on file with BLM/BLA. Required absequent reports much Kell advition 10 dues to the no object of the involved operations. If the operation is an enable operator has determined that the site is ready for final impection. Required information for disposal water File operations. String 4. 1) Name of formation producing matter on lease: Bone Spring	Final Abandonment Notice					
14. 1 hereby certify that the foregoing is true and correct. Electronic Submission #476674 verified by the BLM Well Information System For COG OPERATING LC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 08/05/2019 (19PP2765SE) Name (Printed/Typed) AMANDA AVERY Title Signature (Electronic Submission) Date 08/05/2019 This SPACE FOR FEDERAL OR STATE OFFICE USE Approved By Title 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 criume for any person knowingly and willfully to make to any department or agency of the Uniter States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.	 3) How water is stored on lead 4) How water is moved to dis 5) Disposal Facility #1 a) Facility Operator Name: b) Name of facility or well na c) Type of facility or well: Wid) Location by 1/4,1/4, Sec. 	ase: 2-500 BBL Fiberglass to sposal: Piped to nearest SW COG Operating LLC me & number: Corazon 4 St DW T & R: UL10, Sec 4-T21S-R	ank /D System tate SWD #2 (SWD-1528) 33E	AUG - 6 BUREAU OF LAND I	2019 QALT MANAGEMENT	
Electronic Submission #476674 verified by the BLM Well Information System For COG OPERATING L.C. sent to the Hobbs Committed to AFMSS for processing by PRSCILLA PEREZ on 08/05/2019 (19PP2765SE) Name (Printed/Typed) AMANDA AVERY Title Signature (Electronic Submission) Date 08/05/2019 This Space FOR FEDERAL OR STATE OFFICE USE						
Committed to AFMSS for processing by PRISCILLA PEREZ on 08/05/2019 (19PP27655E) Name (Printed/Typed) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE Signature (Electronic Submission) Date 08/05/2019 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved By Title Date 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 Uniter States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.		Electronic Submission #47 For COG O	PERATING LLC. sent to the H	lobbs		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved By		ommitted to AFMSS for proces	sing by PRISCILLA PEREZ or	n 08/05/2019 (19PP2765SE)		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved By)19		
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(Instructions on page 2) ** BLM REVISED **	Approved By Conditions of approval, if any, are attach certify that the applicant holds legal or e	THIS SPACE FOR ned. Approval of this notice does n quitable title to those rights in the s	Title	OFFICE USE	Date	
** BLM REVISED **	Approved By Conditions of approval, if any, are attach certify that the applicant holds legal or e which would entitle the applicant to cond Title 18 U.S.C. Section 1001 and Title 4	THIS SPACE FOR ned. Approval of this notice does n quitable title to those rights in the s duct operations thereon. 3 U.S.C. Section 1212, make it a cr	Title ot warrant or subject lease rime for any person knowingly and	· · ·		
	Approved By Conditions of approval, if any, are attach certify that the applicant holds legal or e which would entitle the applicant to cond Title 18 U.S.C. Section 1001 and Title 4 States any false, fictitious or fraudulen (Instructions on page 2)	THIS SPACE FOR ned. Approval of this notice does n quitable title to those rights in the s duct operations thereon. 3 U.S.C. Section 1212, make it a cr t statements or representations as to	Title Title ot warrant or subject lease Office rime for any person knowingly and o any matter within its jurisdiction.	willfully to make to any departmen	t or agency of the United	
	Approved By Conditions of approval, if any, are attach certify that the applicant holds legal or e which would entitle the applicant to cond Title 18 U.S.C. Section 1001 and Title 4 States any false, fictitious or fraudulen (Instructions on page 2)	THIS SPACE FOR ned. Approval of this notice does n quitable title to those rights in the s duct operations thereon. 3 U.S.C. Section 1212, make it a cr t statements or representations as to	Title Title ot warrant or subject lease Office rime for any person knowingly and o any matter within its jurisdiction.	willfully to make to any departmen	t or agency of the United	

Additional data for EC transaction #476674 that would not fit on the form

32. Additional remarks, continued

- Amount of water producing in barrels per day: 500 bwpd
 How water is stored on lease: 2-500 BBL Fiberglass tank
 How water is moved to disposal: Piped to nearest SWD System.
 Disposal Facility #2
 Eacility Constrained to Constrain

- a) Facility Operator Name: COG Operating LLC
 b) Name of facility or well name & number: Lightning 1 State SWD #1 (SWD-1373)
 c) Type of facility or well: WDW
 d) Location by 1/4,1/4, Sec, T & R: SENW, Sec 1-T21S-R33E

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.