

**Carlsbad Field Office**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**

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

**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 proposals.*

**SUBMIT IN TRIPLICATE - Other Instructions on page 2**

5. Lease Serial No. NMNM101609
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. TIN FOIL FEDERAL COM 604H
9. API Well No. 30-025-46562-00-X1
10. Field and Pool or Exploratory Area RATTLESNAKE FLAT
11. County or Parish, State  LEA COUNTY, NM

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator COG OPERATING LLC	Contact: MAYTE X REYES E-Mail: mreyes1@concho.com
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 575-748-6945
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  Sec 23 T25S R35E SWSE 400FSL 2320FEL 32.109695 N Lat, 103.337273 W Lon	

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recomple 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.

COG Operating respectfully requests approval for the following changes to the originally approved APD.

Pilot Hole:  
Drill 6 ?? Pilot Hole from 11,625? to 12,510? MD/TVD with 10 ppg brine  
Cement with 1 plug from 12,510? to 11,500? with 260sx of class H @ 17.5ppg, 0.957 cuft/sx.

Dedicated Acres:  
C102 Attached.

The pilot hole plugging procedure is approved as written. Note plug tops on a subsequent report. All other previous conditions of Approval still apply. DR

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #495259 verified by the BLM Well Information System</b> <b>For COG OPERATING LLC, sent to the Hobbs</b> <b>Committed to AFMSS for processing by PRISCILLA PEREZ on 12/10/2019 (20PP0615SE)</b>	
Name (Printed/Typed) MAYTE X REYES	Title SENIOR REGULATORY ANALYST
Signature (Electronic Submission)	Date 12/10/2019

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <u>DYLAN ROSSMANGO</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>12/11/2019</u>
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 Hobbs		

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 \*\* BLM REVISED \*\***

KZ

DISTRICT I  
1825 N. FRENCH DR., BOBBS, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II  
811 S. FIRST ST., ARTESIA, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-0720

DISTRICT III  
1000 RIO BRAZOS RD., AZTEC, NM 87410  
Phone: (505) 834-8178 Fax: (505) 834-8170

DISTRICT IV  
1220 S. ST. FRANCIS DR., SANTA FE, NM 87505  
Phone: (505) 476-3450 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 SOUTH ST. FRANCIS DR.  
Santa Fe, New Mexico 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-025-46562	Pool Code 98187	Pool Name WC-025 G-09 S253502D; Upper Wolfcamp
Property Code 326507	Property Name TIN FOIL FEDERAL COM	Well Number 604H
GRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3153.8'

**Surface Location**

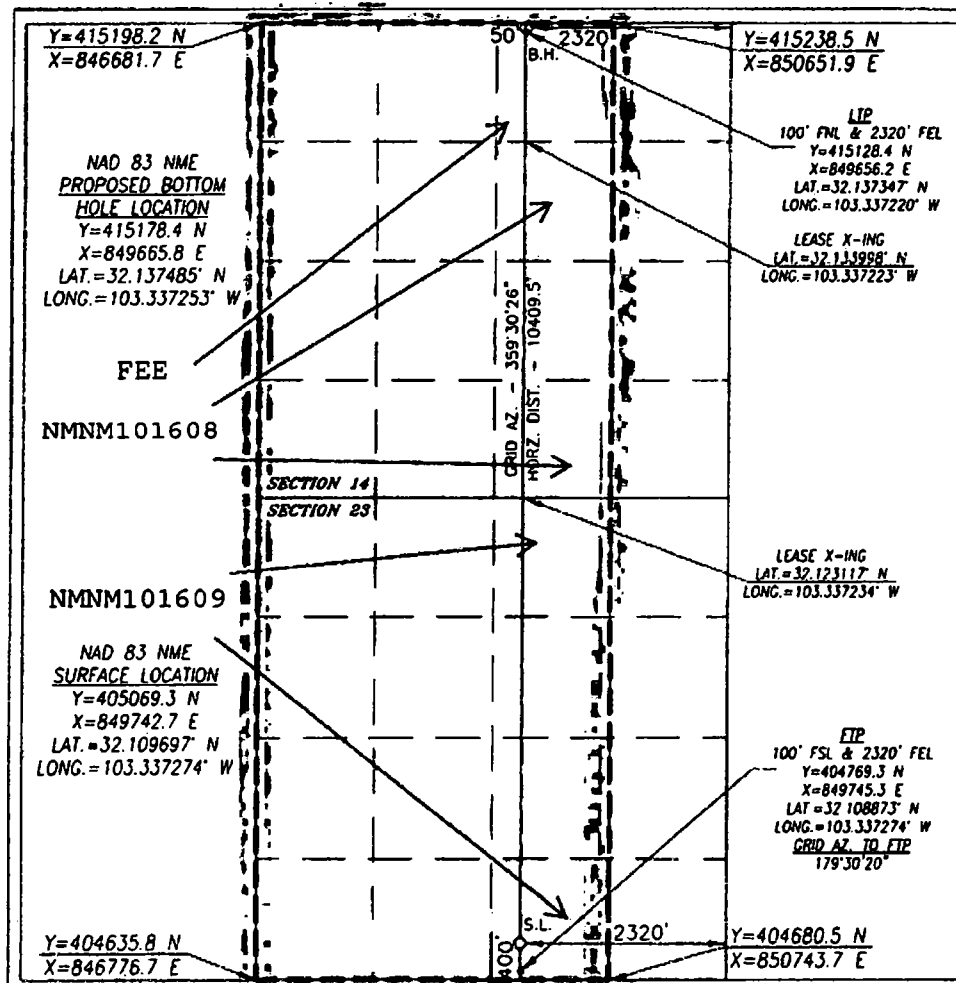
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	23	25-S	35-E		400	SOUTH	2320	EAST	LEA

**Bottom Hole Location If Different From Surface**

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	14	25-S	35-E		50	NORTH	2320	EAST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
960			

**NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION**



**OPERATOR CERTIFICATION**

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: *Mayte Reyes* Date: 12-10-19

Printed Name: Mayte Reyes

E-mail Address: mreyes1@concho.com

B-mail Address:

**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

JULY 17, 2019

Date of Survey

Signature & Seal of Professional Surveyor



Chad L. Harcrow 7/26/19  
Certificate No. CHAD HARCROW 17777  
W.O. #19-1359 DRAWN BY: CD