		OCD – REC'D 7/01/2020					
Form 3160-5 (June 2015)	UNITED STATES DEPARTMENT OF THE INTERIOF		OR		FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No.		
		BUREAU OF LAND MANAGEMENT					
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an					NMNM123535		
abandoned	6. If Indian, Allottee or Tribe Name						
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well ☑ Oil Well □ Gas Well □ Other					8. Well Name and No. BROT HELM FEDERAL COM 703H		
2. Name of Operator Contact: AMANDA AVERY COG OPERATING LLC E-Mail: aavery@concho.com					9. API Well No. 30-025-46070-00-X1		
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287			8-6940 WC0		10. Field and Pool or 1 WC025G09S25 WILDCAT	. Field and Pool or Exploratory Area WC025G09S253402N-WOLFCAMP WILDCAT	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish,	State	
Sec 35 T24S R34E NENE 250FNL 1255FEL 32.180565 N Lat, 103.436295 W Lon					LEA COUNTY,	NM	
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA							
TYPE OF SUBMISSION	YPE OF SUBMISSION TYPE OF ACTION						
☑ Notice of Intent	□ Acidize	🗖 Deep	en	Produce	ction (Start/Resume)	□ Water Shut-Off	
□ Subsequent Report	□ Alter Casing	-	aulic Fracturing	□ Reclan		□ Well Integrity	
☐ Final Abandonment Notice	Casing Repair	_	Construction and Abandon	□ Recom	plete prarily Abandon	□ Other	
	Convert to Injection	D Plug		☐ Tempe ⊠ Water	-		
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 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: Bone Spring 2) Amount of water producing in barrels per day: 5000 bwpd 3) How water is stored on lease: 2-750 BBL Fiberglass tank 4) How water is moved to disposal: Piped/Trucked to nearest SWD System. 5) Disposal Facility #1 a) Facility Operator Name: Owl SWD Operating, LLC Water leaves COG well pad and is piped to an Owl SWD via trunk line. Accepted - NMOCD							
14. I hereby certify that the foregoin	ng is true and correct. Electronic Submission #515	707 verified	l by the BLM Wel	I Informatio	on System		
For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 05/18/2020 (20PP2609SE)							
Name(Printed/Typed) AMAN	DA AVERY		Title REGUL	ATORY AN	NALYST		
Signature (Electron	nic Submission)		Date 05/18/2	020			
	THIS SPACE FOR	FEDERA	L OR STATE	OFFICE L	JSE		
						Date 05/21/2020	
Approved By_DEBORAH_MCKINNEY						U_UUUUUUU	
certify that the applicant holds legal or which would entitle the applicant to co	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)	en satements of representations as to a						

** BLM REVISED **

Additional data for EC transaction #515707 that would not fit on the form

32. Additional remarks, continued

Disposal Facility #2 a) Facility Operator Name: Delaware Energy LLC b) Name of facility or well name & number: Moomaw SWD #1 (SWD-1730) c) Type of facility or well: WDW d) Location by 1/4,1/4, Sec, T & R: N, Sec 25-T24S-R34E

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.

Revisions to Operator-Submitted EC Data for Sundry Notice #515707

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	DISPOSE NOI	DISPOSE NOI
Lease:	NMNM123535	NMNM123535
Agreement:		
Operator:	COG OPERATING LLC 2208 W MAIN STREET ARTESIA, NM 88210 Ph: 575-748-6940	COG OPERATING LLC ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 Ph: 432.685.4342
Admin Contact:	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com
	Ph: 575-748-6940	Ph: 575-748-6940
Tech Contact:	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com
	Ph: 575-748-6940	Ph: 575-748-6940
Location: State: County:	NM LEA	NM LEA
Field/Pool:	WC-025 G-09 S253402N; WC	WC025G09S253402N-WOLFCAMP WILDCAT
Well/Facility:	BROT HELM FEDERAL COM 703H Sec 35 T24S R34E Mer NMP NENE 250FNL 1255FEL	BROT HELM FEDERAL COM 703H Sec 35 T24S R34E NENE 250FNL 1255FEL 22 180656 NL 412 406205 WL op

Sec 35 T24S R34E NENE 250FNL 1255FEL 32.180565 N Lat, 103.436295 W Lon