Form 3160- 5 (August, 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	Rabbs	
CD	Artesia	

FORM APPROVED OMB No. 1004- 0137

Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter as CD abandoned well. Use Form 3160-3 (APD) for such a proposals.

NMNM64606

6. If Indian, Allottee, or Tribe Name

5. Lease Serial No.

SUBMIT IN TRIPLICATE - Other Instructions on page 2.				7. If Unit or CA. Agreement Name and/or No.			
Type of Well Gas Well Other		JUN 02 2014		8. Well Name and No.			
2. Name of Operator	/ []				a 12 Federal C	om #1H	
COG Operating LLC			ECEIVED	9. API Well No.			
3a. Address 2208 W. Main Street		3b. Phone No. (includ	,	} :	30-025-41491		
Artesia, NM 88210		575-74	18-6946	10. Field and Pool,	or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Lat.		Red Tank; Bone Spring		
SHL: 190' FSL & 330' FEL, U	` '		Long.	11. County or Paris	sh, State	ND 4	
BHL: 336' FNL & 433' FEL, U			RT OR OTHER D	Lea_		NM /	
TYPE OF SUBMISSION			PE OF ACTION		***		
Notice of Intent	Acidize	Deepen	Production (S	art/ Pacuma)	Water Shut-off		
	Altering Casing	Fracture Treat		ato Resulte)	_		
—			Reclamation		Well Integrity		
X Subsequent Report	Casing Repair	New Construction	Recomplete	,	X Other		
	Change Plans	Plug and abandon	Temporarily A	bandon _	Completion	Operations	
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposa	1 <u>-</u>	<u></u>		
1/14/14 to 1/16/14 MIRU. 7/8500# for 30 mins. Good tes 1/19/14 Perforate Bone Sprin 1/20/14 to 1/25/14 Perforate 2523318 gal fluid. 1/30/14 Drilled out all frac p 1/31/14 to 2/1/14 Set 2 7/8" 2/2/14 Began flowing back &	Fest csg & BOP to 8500act. Ing 16278-16288' (60). For Bone Spring 12106-161 and the strength of the strength	Perform injection test. 15' (396). Acdz w/68	958 gal 7 1/2% :	CEPTED MAY	41441# sand & FOR REC 2 1 2014 AND MANAGE	CORD	
 I hereby certify that the foregoing is true a Name (Printed/Typed) 	nd correct.	1		CARLSBA	D FIELD OFFIC	<u>t</u>	
Stormi Davis		Title: Regu	latory Analyst				
Signature:	• •	Date: 2/20/	· ·				
June 19	THIS SPACE FO	OR FEDERAL OR STA		E			
A						=	
Approved by: Conditions of approval, if any are attached				Date:			
certify that the applicant holds legal or equivalent would entitle the application of the control of the contro	eant to conduct operat	ions thereon.				=======================================	
Title 18 U.S.C. Section 1001 AND Title			knowingly and willf	uny to make any d	epartment or agenc	y of the United	