

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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.*

OCD Hobbs

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

~~HOBBSS~~

OCT 27 2014

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM107392	
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name	
Contact: MAYTE X REYES E-Mail: mreyes1@concho.com		7. If Unit or CA/Agreement, Name and/or No.	
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287		8. Well Name and No. NIGHTCAP 6 FEDERAL 3H	
3b. Phone No. (include area code) Ph: 575-748-6945		9. API Well No. 30-025-41589-00-X1	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T20S R32E Lot 3 330FNL 2020FWL		10. Field and Pool, or Exploratory LUSK	
		11. County or Parish, and State LEA COUNTY, NM	

**12. CHECK 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"/> Fracture Treat	<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 recompleat 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall 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 LLC, respectfully requests approval for the following name change to the original approved APD.

OPER. OGRID NO. 229137

PROPERTY NO. 313831

POOL CODE 41460

EFF. DATE

APD NO. 30-025-41589

From: Nightcap 6 Federal #3H  
To: Nightcap 6 Federal Com #3H

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #272757 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER MASON on 10/22/2014 (15JAM0013SE)	
Name (Printed/Typed) MAYTE X REYES	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 10/22/2014
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 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.	

APPROVED

OCT 22 2014

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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

OCT 28 2014

Run Time: 01:37 PM

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Run Date: 10/22/2014

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## LLD ACREAGE REPORT

Admin State: NM

Geo State: NM

MTR: 23 0200S 0320E

Section: 006

<u>Sur Type</u>	<u>Sur No</u>	<u>Lld Suff</u>	<u>NE</u> <u>NW</u> <u>SW</u> <u>SE</u> <u>NNSS</u> <u>NNSS</u> <u>NNSS</u> <u>NNSS</u> <u>EWWE</u> <u>EWWE</u> <u>EWWE</u> <u>EWWE</u>	<u>Sur Note</u>	<u>Dup</u> <u>Flg</u>	<u>Sub</u> <u>Surf</u>	<u>Acreage</u>
A			--XX ---X X--X XXXX				360.000
L	1		X----				39.910
L	2		-X---				39.940
L	3		----X----				39.960
L	4		----X----				39.100
L	5		----X----				39.150
L	6		----X----				39.190
L	7		----X----				39.220

Section 006 Total: 636.470

MTR Total Excluding Survey Notes C/D/R  
and Sub Surf = Y 636.470Grand Total Excluding Survey Notes C/D/R  
and Sub Surf = Y: 636.470