UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS **HOBBS OCD** 

FORM APP	ROVE
OMB NO. 10	04-013
Expires: July	31 201

SUNDRY NOTICES AND REPORTS ON WELLS JUN 2 9 2015  Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				Lease Serial No.     NMNM120908     G. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on reverse side RECEIVED			7. If Unit or CA/Agree	7. If Unit or CA/Agreement, Name and/or No.			
Type of Well     Gas Well				8. Well Name and No. WINDWARD FED	8. Well Name and No. WINDWARD FEDERAL 3H		
2. Name of Operator Contact: STORMI DAVIS COG PRODUCTION LLC E-Mail: sdavis@concho.com			9. API Well No. 30-025-41413-0	9. API Well No. 30-025-41413-00-S1			
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210	3b. Phone No. (inclu Ph: 575-748-694			e) 10. Field and Pool, or Exploratory WC-025 G06 S253206M			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, a	11. County or Parish, and State		
Sec 30 T24S R32E NWNE 190FNL 2100FEL 2100FEL 32.194974 N Lat, 103.711542 W Lon			LEA COUNTY,	LEA COUNTY, NM			
12. CHECK APP	ROPRIATE BOX(ES) TO	INDICATE	NATURE OF N	OTICE,	REPORT, OR OTHER	R DATA	
TYPE OF SUBMISSION		TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize	☐ Dee	pen	☐ Produ	uction (Start/Resume)	☐ Water S	hut-Off
_ ,	☐ Alter Casing	☐ Frac	ture Treat	☐ Recla	mation	■ Well Int	tegrity
■ Subsequent Report	Casing Repair	□ Nev	Construction	☐ Recomplete		Other	
☐ Final Abandonment Notice	Change Plans	🗖 Plug	and Abandon "	☐ Temporarily Abandon			
•	☐ Convert to Injection	🗖 Plug	Back	☑ Water Disposal			
13. Describe Proposed or Completed Op If the proposal is to deepen direction. Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for f	ally or recomplete horizontally, and the performed or provide a portations. If the operation respondent Notices shall be file in all inspection.)	give subsurface the Bond No. or ults in a multiple ad only after all	locations and measure a file with BLM/BIA. e completion or recom	d and true Required pletion in	vertical depths of all perting subsequent reports shall be a new interval, a Form 3160	ent markers and filed within 30 0-4 shall be file	d zones. days ed once
1) Name of formation producing water on lease: Bone Spring 2) Amount of water produced in barrels per day: 2500 BWPD 3) How water is stored on lease: 2 - 500 bbl fiberglass tanks 4) How water is moved to disposal facility: Trucked 5) Disposal Facility #1: a) Facility Operator Name: COG Operating LLC b) Name of facility or well name & number: Pintail 3 Federal SWD #1 (SWD-1396) c) Type of facility or well: WDW d) Location by 1/4, 1/4, Section, Township & Range: NWSE, Sec 3-T26S-R32E Disposal Facility #2:							
14. I hereby certify that the foregoing is true and correct.  Electronic Submission #288928 verified by the BLM Well Information System  For COG PRODUCTION LLC, sent to the Hobbs  Committed to AFMSS for processing by LINDA JIMENEZ on 01/30/2015 (15LJ0602SE)  Name (Printed/Typed) STORMI DAVIS  Title PREPARER							
Name (Printed/Typed) STORMI	JAVIS ,		Title PREPAR	EK			
Signature (Electronic S	Submission)		Date 01/22/201	15	APPROVE	ΞD	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved By			Title	الم	JUN 23 201	Date	
Conditions of approval, if any, are attache certify that the applicant holds legal or equ which would entitle the applicant to condu	itable title to those rights in the		Office	N X	JAMES A. AMO SUPERVISOR-EI	S PS	

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.

## Additional data for EC transaction #288928 that would not fit on the form

## 32. Additional remarks, continued

a) Facility Operator Name: COG Operating LLC
b) Name of facility or well name & number: Eata Fajita 8 State SWD #1 (SWD-1361)
c) Type of facility of well: WDW
d) Location by 1/4, 1/4, Section, Township & Range: SENW, Sec 8-T24S-R33E

## BUREAU OF LAND MANAGEMENT

Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

## Disposal of Produced Water From Federal Wells Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

- 1. This agency shall be notified of any change in your method or location of disposal.
- 2. Compliance with all provisions of Onshore Order No. 7.
- 3. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- 5. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
- 6. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
- 7. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
- 8. Disposal at any other site will require prior approval.
- 9. Subject to like approval by NMOCD.

7/10/14