

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. GUNNER 8 FEDERAL COM 9H
2. Name of Operator COG OPERATING LLC Contact: MAYTE X REYES E-Mail: mreyes1@concho.com		9. API Well No. 30-025-42905
3a. Address 2208 WEST MAIN STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6945	10. Field and Pool, or Exploratory WC-025 G-06 S263407P;U BS
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 8 T26S R34E SWSW 200FSL 890FWL		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 APD
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 to add a Flex Hose Variance to the original approved APD.

Flex Hose Variance attached.

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #322905 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by KENNETH RENNICK on 11/10/2015 ( )</b>	
Name (Printed/Typed) MAYTE X REYES	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 11/09/2015

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

Approved By _____	Title _____	Date _____
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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

**BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE**

**NOV 23 2015**

# PECOS DISTRICT CONDITIONS OF APPROVAL

Gunner 8 Federal Com 9H  
API: 30-025-42905  
COG Operating LLC  
Section 8, T26S, R34E  
Lea County

HOBBS OCD

NOV 16 2015

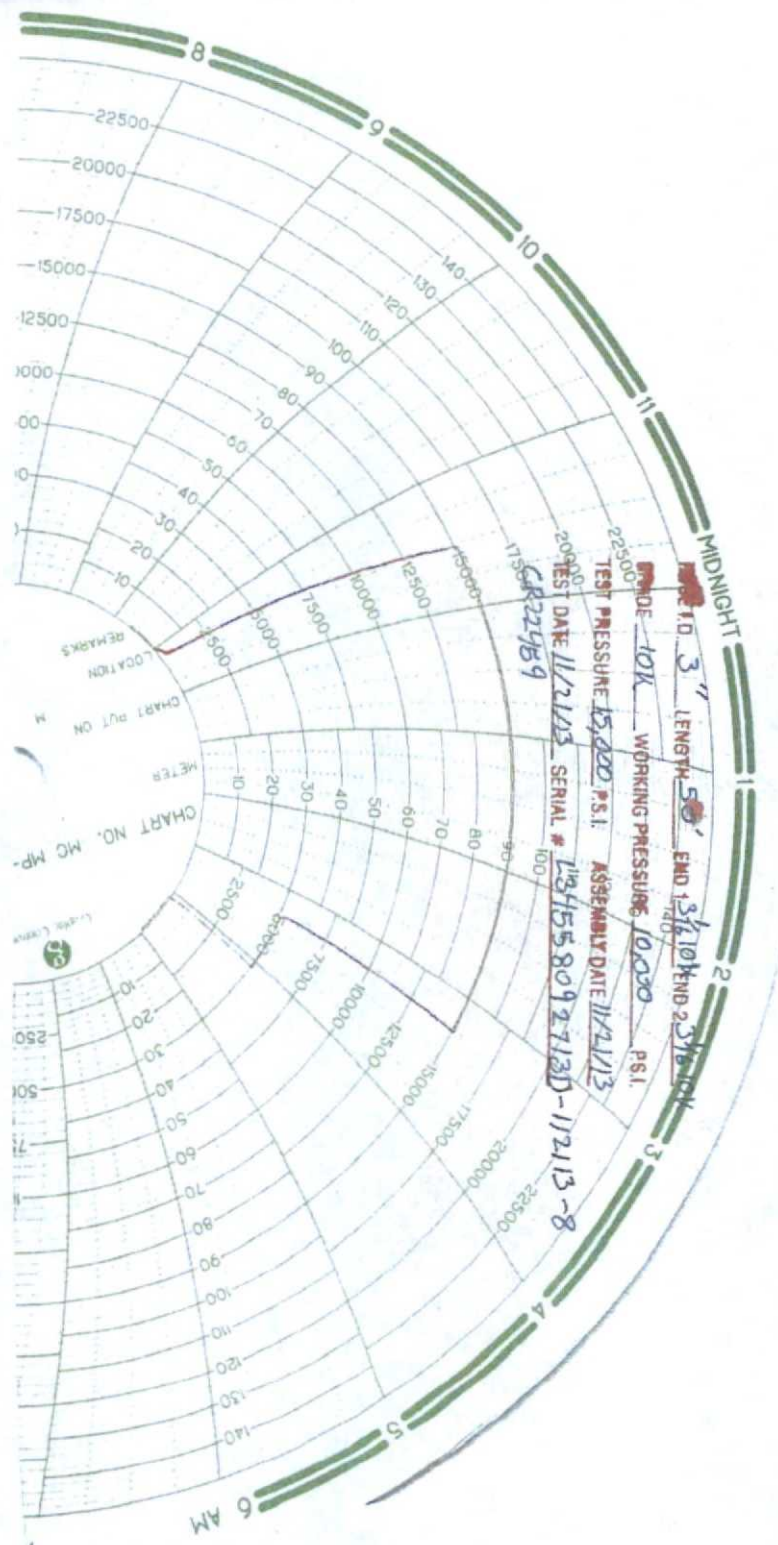
RECEIVED

**Original COA still applies except for the addition of the flex line's conditions of approval.**

1. Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. These documents shall be posted in the company man's trailer and on the rig floor.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).

**KGR 11102015**





MODE 10K WORKING PRESSURE 10,000 PSI

TEST PRESSURE 15,000 PSI ASSEMBLY DATE 11/21/13

TEST DATE 11/21/13 SERIAL # 134558092713D-112113-8

CR22469

LOCATION  
REMARKS

CHART NO. MC MP-  
METER

CHART NO. MC MP-  
METER

MIDNIGHT

6 AM



GATES E & S NORTH AMERICA, INC  
DU-TEX  
134 44TH STREET  
CORPUS CHRISTI, TEXAS 78405

PHONE: 361-887-9807  
FAX: 361-887-0812  
EMAIL: crpe@s@gates.com  
WEB: www.gates.com

### 10K CHOKE & KILL ASSEMBLY PRESSURE TEST CERTIFICATE

Customer :	SPECIALTY SALES, INC.	Test Date:	11/21/2013
Customer Ref. :	49680-S	Hose Serial No.:	D-112113-8
Invoice No. :	197465	Created By:	Norma M.
Product Description:	10K3.050.0CK31/1610KFLGE/E		
End Fitting 1 :	3 1/16 10K FLG	End Fitting 2 :	3 1/16 10K FLG
Gates Part No. :	47773-4290	Assembly Code :	L34558092713D-112113-8
Working Pressure :	10,000 PSI	Test Pressure :	15,000 PSI

Gates E & S North America, Inc. certifies that the following hose assembly has been tested to the Gates Oilfield Roughneck Agreement/Specification requirements and passed the 15 minute hydrostatic test per API Spec 7K/Q1, Fifth Edition, June 2010, Test pressure 9.6.7 and per Table 9 to 15,000 psi in accordance with this product number. Hose burst pressure 9.6.7.2 exceeds the minimum of 2.5 times the working pressure per Table 9.

Quality Manager :	QUALITY	Technical Supervisor :	PRODUCTION
Date :	11/22/2013	Date :	11/22/2013
Signature :		Signature :	









