

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
HobbsFORM 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		5. Lease Serial No. NMNM124664
2. Name of Operator COG OPERATING LLC <input checked="" type="checkbox"/>		6. If Indian, Allottee or Tribe Name
Contact: STORMI DAVIS		7. If Unit or CA/Agreement, Name and/or No.
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 575.748.6946	8. Well Name and No. GUNNER 8 FEDERAL COM 7H <input checked="" type="checkbox"/>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 8 T26S R34E SESW 190FSL 2625FEL <input checked="" type="checkbox"/>		9. API Well No. 30-025-41211-00-X1 <input checked="" type="checkbox"/>
		10. Field and Pool, or Exploratory WC-025 G08 S213304D
		11. County or Parish, and State LEA COUNTY, NM

HOBBS OCD

APR 25 2016

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA

RECEIVED

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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	
	<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.)

8/18/15 to 8/28/15 MIRU. Load & test 9 5/8" x 5 1/2" annulus to 1500#. Good test. Test 5 1/2" csg to 8500# for 15 mins. Good test. Drill out DVT. Circ clean. Test csg to 8500# for 15 mins. Good test. Perforate 19635-19645' (36). Pump injection test.

1/5/16 to 2/1/16 Set CBP @ 19605'. Test csg to 8107#. Perforate Bone Spring 10029-19585' (2304). Acidz w/196450 gal 7 1/2% acid. Frac w/19,129,271# sand & 18,240,140 gal fluid.

2/4/16 to 2/14/16 Drilled out all CFP's & cleaned out to CBP @ 19605'.

2/17/16 Set 2 7/8" 6.5# L-80 tbg @ 10001' & pkr @ 9241'.

2/22/16 Began flowing back & testing.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #332421 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 04/18/2016 (16JAS0325SE)	
Name (Printed/Typed) STORMI DAVIS	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 02/29/2016

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.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

MAY 09 2016

Additional data for EC transaction #332421 that would not fit on the form

32. Additional remarks, continued

2/24/16 Date of first production.