

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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.

5. Lease Serial No.  
NMNM120908

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
WINDWARD FEDERAL 5H9. API Well No.  
30-025-43174-00-X110. Field and Pool, or Exploratory  
WC-025 G06 S253206M11. County or Parish, and State  
LEA COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

## 1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

## 2. Name of Operator

COG PRODUCTION LLC

Contact: MAYTE X REYES  
E-Mail: mreyes1@concho.com

## 3a. Address

2208 W MAIN STREET  
ARTESIA, NM 88210

## 3b. Phone No. (include area code)

Ph: 575-748-6945

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 30 T24S R32E Lot 1 210FNL 530FWL

## 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 Production LLC, respectfully requests approval to replace the Flex Hose Variance Report with the original approved with the APD.

Attached: Updated "Flex Hose Variance Report"

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #355663 verified by the BLM Well Information System

For COG PRODUCTION LLC, sent to the Hobbs

Committed to AFMSS for processing by DEBORAH MCKINNEY on 10/25/2016 (17DLM0033SE)

Name (Printed/Typed) MAYTE X REYES

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 10/24/2016

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By MUSTAFA HAQUE

Title PETROLEUM ENGINEER

Date 11/04/2016

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 Hobbs

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 \*\*

MSB/OCD 11/16/2016

## PECOS DISTRICT CONDITIONS OF APPROVAL

OPERATOR'S NAME:	COG Production LLC
LEASE NO.:	NMNM120908
WELL NAME & NO.:	5H – Windward Federal
SURFACE HOLE FOOTAGE:	210'/N & 530'/W
BOTTOM HOLE FOOTAGE	50'/S & 330'/W SEC. 31
LOCATION:	Section 30, T 24 S., R 32 E., NMPM
COUNTY:	Lea County, New Mexico

**All previous COAs still apply except for the following:**

### **A. PRESSURE CONTROL**

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).

**MHH 11042016**





Midwest Hose  
& Specialty, Inc.

### Internal Hydrostatic Test Certificate

General Information		Hose Specifications	
Customer	Hobbs	Hose Assembly Type	Rotary/Vibrator
MWH Sales Representative	Ryan Rynolds	Certification	API 7K/FSL Level 2
Date Assembled	11/19/2015	Hose Grade	D
Location Assembled	OKC	Hose Working Pressure	5000
Sales Order #	271739	Hose Lot # and Date Code	11834 11/14
Customer Purchase Order #	302337	Hose I.D. (Inches)	3.5"
Assembly Serial # (Pick Ticket #)	326000	Hose O.D. (Inches)	4.89"
Hose Assembly Length	25'	Aarmor (yes/no)	No
Fittings			
End A		End B	
Stem (Part and Revision #)	R3.5X64WB	Stem (Part and Revision #)	R3.5X64WB
Stem (Heat #)	A144783	Stem (Heat #)	A144783
Ferrule (Part and Revision #)	RF3.5	Ferrule (Part and Revision #)	RF3.5
Ferrule (Heat #)	J1628	Ferrule (Heat #)	J1628
Connection . Flange Hammer Union Part	4-1/16 5000	Connection (Part #)	4-1/16 5000
Connection (Heat #)	14032501	Connection (Heat #)	1404H321
Nut (Part #)	N/A	Nut (Part #)	N/A
Nut (Heat #)	N/A	Nut (Heat #)	N/A
Dies Used	5.49"	Dies Used	5.49"
Hydrostatic Test Requirements			
Test Pressure (psi)	10,000	Hose assembly was tested with ambient water temperature.	
Test Pressure Hold Time (minutes)	11 1/2		
Date Tested	Tested By		Approved By
11/19/2015			



Midwest Hose  
& Specialty, Inc.

### Certificate of Conformity

Customer: **Hobbs**

Customer P.O.# **302337**

Sales Order # **271739**

Date Assembled: **11/19/2015**

### Specifications

Hose Assembly Type: **Rotary/Vibrator**

Assembly Serial # **326000**

Hose Lot # and Date Code **11834 11/14**

Hose Working Pressure (psi) **5000**

Test Pressure (psi) **10000**

*We hereby certify that the above material supplied for the referenced purchase order to be true according to the requirements of the purchase order and current industry standards.*

Supplier:

**Midwest Hose & Specialty, Inc.**

**3312 S I-35 Service Rd**

**Oklahoma City, OK 73129**

Comments:

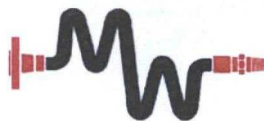
Approved By

*Kim Thomas*

Date

**11/19/2015**





Midwest Hose  
& Specialty, Inc.

## Internal Hydrostatic Test Graph

November 19, 2015

Customer: Hobbs

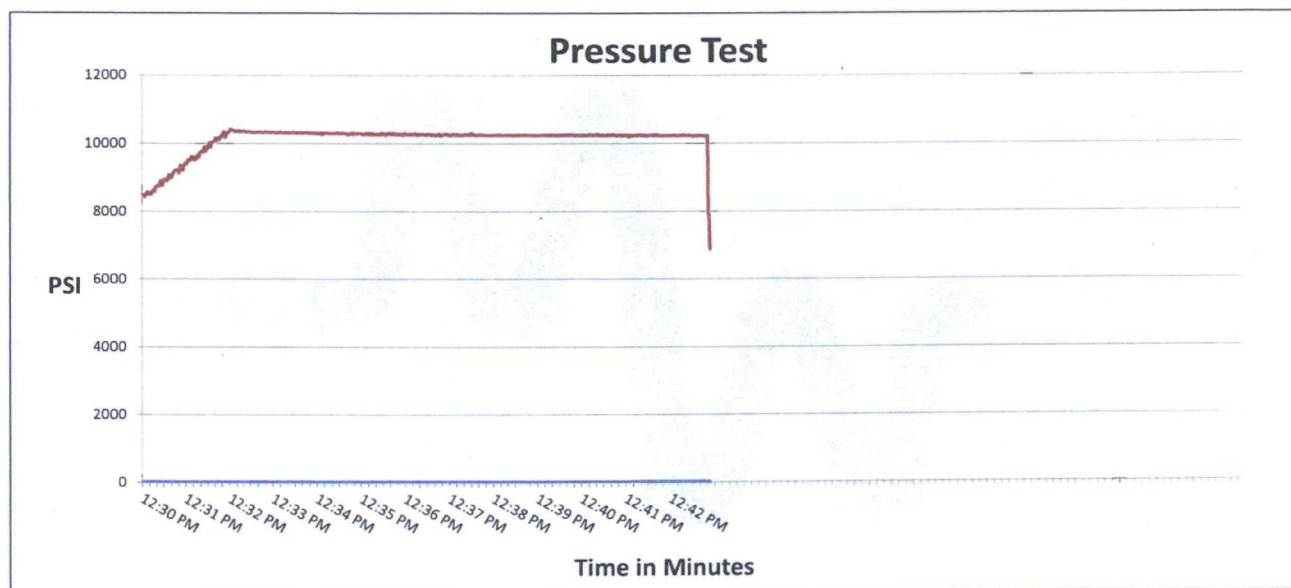
Pick Ticket #: 326000

### Hose Specifications

<u>Hose Type</u>	<u>Length</u>
D	25'
<u>I.D.</u>	<u>O.D.</u>
3.5"	4.89"
<u>Working Pressure</u>	<u>Burst Pressure</u>
5000 PSI	Standard Safety Multiplier Applies

### Verification

<u>Type of Fitting</u>	<u>Coupling Method</u>
4 1/16 SK	Swage
<u>Die Size</u>	<u>Final O.D.</u>
5.49"	5.50"
<u>Hose Serial #</u>	<u>Hose Assembly Serial #</u>
11834	326000



Test Pressure  
10000 PSI

Time Held at Test Pressure  
11 2/4 Minutes

Actual Burst Pressure

Peak Pressure  
10473 PSI

**Comments:** Hose assembly pressure tested with water at ambient temperature.

**Tested By:** James Hawkins

**Approved By:** Kim Thomas

x

x

## Hose Assembly & Test Report

General Information		Hose Specifications	
Customer	Hobbs	Hose Assembly Type	choke + k11
Date Assembled	6-26-14	Certification	API 7K
Location Assembled	Okc	Hose Grade	D
Sales Order #	216297	Hose Working Pressure	5,000
Customer Purchase Order #	237512	Hose Lot #	8309
Hose Assembly Serial #	260212	Hose Date Code	04/12
Pick Ticket Line Item	0010	Hose I.D. (Inches)	3.5 inches
Hose Assembly Length (Feet and Inches)	50 feet	Hose O.D. (Inches)	5.49
Contact Information Phone #		Armor (yes/no)	yes

Fittings			
End A		End B	
Stem (Part and Revision #)	R3.5 x 64 WB	Stem (Part and Revision #)	R3.5 x 64 WB
Stem (Heat #)	13114050225	Stem (Heat #)	13114050225
Stem (Rockwell Hardness HRB #)	—	Stem (Rockwell Hardness HRB #)	—
Ferrule (Part and Revision #)	RF 3.5	Ferrule (Part and Revision #)	RF 3.5
Ferrule (Heat #)	126151	Ferrule (Heat #)	372114
Ferrule (Rockwell Hardness HRB #)	—	Ferrule (Rockwell Hardness HRB #)	—
Connection (Part #)	4 1/16 SK	Connection (Part #)	4 1/16 SK
Connection (Heat #)	V3360	Connection (Heat #)	V3360
Connection (Brinell Hardness HB #)	—	Connection (Brinell Hardness HB #)	—
Stress Relief #	17614	Stress Relief #	17614
Welding #	MKR	Welding #	MKR
X-ray #	—	X-ray #	—

Assembly Information			
End A		End B	
Skive O.D. (Inches)	5.04	Skive O.D. (Inches)	4.92
Swager Dies (1st pass)	5.62	Swager Dies (1st pass)	5.53
Swager Dies (2nd pass)	—	Swager Dies (2nd pass)	—
Final Swage O.D. (Inches)	5.14	Final Swage O.D. (Inches)	4.98
Compression % (See Crimp Calculator)	94%	Compression % (See Crimp Calculator)	22%
Swaged By		Charles Ash	

Hydrostatic Test Requirements			
Test Pressure (psi)	10,000	Hold Time (minutes)	13 1/4
Tested By	Charles Ash	Date Tested	6-26-14

This is to certify that the above Hose Assembly has been satisfactorily tested in accordance with MHSI procedure 8.2.4.2

Final Verification			
	<input checked="" type="checkbox"/>	No	Hammer Unions
	<input checked="" type="checkbox"/>	No	Safety Clamps
Third Party Witness	Customer or Third Party Witnessed By:		