Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED

OMB.	NO. 100	4-0	13/	
Expires:	January	31,	201	8
eace Serial No				

Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.			NMNM086					
			6. If Indian, Allottee or Tribe Name					
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well ☐ Gas Well ☐ Other					8. Well Name and No. TUSK FEDERAL 4H			
Name of Operator Contact: BRIAN MAIORINO COG OPERATING LLC E-Mail: bmaiorino@concho.com					9. API Well No. 30-025-41358-00-S1			
3a. Address ONE CONCHO CENTER 60 MIDLAND, TX 79701-4287	0 W ILLINOIS AVENUE	3b. Phone No. Ph: 432.221	(include area code) 1.0467		10. Field and Pool or I LEA	Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State				
Sec 25 T19S R34E SWSE 0250FSL 2080FEL 2080FEL 32.624624 N Lat, 103.511107 W Lon					LEA COUNTY, NM			
12. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICAT	TE NATURE O	F NOTICE	, REPORT, OR OTH	IER DATA		
TYPE OF SUBMISSION								
☐ Notice of Intent	☐ Acidize	☐ Deep	en	☐ Produc	ction (Start/Resume)	☐ Water Shut-Off		
	☐ Alter Casing	☐ Hydr	aulic Fracturing	☐ Reclan	nation	☐ Well Integrity		
Subsequent Report	☐ Casing Repair	☐ New	Construction	☐ Recom	plete	☑ Other Venting and/or Flari		
☐ Final Abandonment Notice	☐ Change Plans	Plug	and Abandon	☐ Tempo	orarily Abandon	ng		
	☐ Convert to Injection	Plug	Back	☐ Water Disposal				
13. Describe Proposed or Completed Ope If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final Ab- determined that the site is ready for final Actual gas flared at the Tusk F NOI Submission #346530	ally or recomplete horizontally, will be performed or provide operations. If the operation re andonment Notices must be fil inal inspection.	give subsurface let the Bond No. on esults in a multiple led only after all re	ocations and measu file with BLM/BIA completion or reco	red and true value of Required sompletion in a	vertical depths of all pertinubsequent reports must be new interval, a Form 3160	ent markers and zones. filed within 30 days 0-4 must be filed once		
Wells: Tusk Fed 4H, 30-025-41358								
August: 603 mcf								
September: 0 mcf October: 0								
				/	$\gamma V/$			
14. I hereby certify that the foregoing is Comm Name (Printed/Typed) BRIAN MA	#Electronic Submission For COG nitted to AFMSS for proces	OPERATING L	LC, sent to the H FER SANCHEZ o	lobbs n 12/1/3/201	/ /	/- //		
			7.0	ACCEP	TED FOR REC	SORD		
Signature (Electronic S			Date 12/13/2		1/ /	Ť A		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE								
Approved By			Title	Vh.		Date		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conductive the	uitable title to those rights in that operations thereon.	e subject lease	Office	1	U OF LAND MANAGEM RLSBAD FIELD OFFICE			
Title 18 IJ S.C. Section 1001 and Title 43	U.S.C. Section 1212 make it a	crime for any ner	son knowingly and	willfully to n	nake to any department or	agency of the United		

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)
** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** Accepted for Record Only

MUS/OCD 12/27/2014

Additional data for EC transaction #360754 that would not fit on the form

32. Additional remarks, continued

November: 0