| Form 3160-5<br>(June 2015) DE  | UNITED STATES<br>EPARTMENT OF THE INTERIOR<br>UREAU OF LAND MANAGEMENT |                            |   | FORM APPROVED<br>OMB NO. 1004-0137<br>Expires: January 31, 2018 |  |  |
|--|--|----------------------------|---|---|--|--|
| BUREAU OF LAND MANAGEMENT  |  |                            |   | 5. Lease Serial No.<br>NMNM88163                                |  |  |
| Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals OBBS O  |  |                            |   | 6. If Indian, Allottee or Tribe Name                            |  |  |
|  | TRIPLICATE - Other instruct  | tions on page 2            | R 1 7 20177. If Un  | it or CA/Agreemen   | t, Name and/or No.                               |  |
| 1. Type of Well     ☑ Oil Well     □ Gas Well     □ Other       2. Name of Organization     □ Other     ■ RECEIV   |  |                            |   | E Well Name and No.<br>VION FEDERAL 02                          |  |  |
| 2. Name of Operator Contact: AMANDA AVERY COG OPERATING LLC E-Mail: aavery@concho.com  |  |                            |   | 9. API Well No.<br>30-025-33862-00-S1                           |  |  |
| 3a. Address       3b. Phone No. (include area code)         ONE CONCHO CENTER 600 W ILLINOIS AVENUE       9h: 575-748-6940         MIDLAND, TX 79701-4287       9h: 575-748-6940   |  |                            |   | 10. Field and Pool or Exploratory Area<br>DIAMONDTAIL           |  |  |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)   |  |                            |   | 11. County or Parish, State                                     |  |  |
| Sec 22 T23S R32E SESE 990FSL 330FEL  |  |                            |   | LEA COUNTY, NM  |  |  |
| 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  |  |                            |   |   |  |  |
| TYPE OF SUBMISSION   | TYPE OF ACTION   |                            |   |   |  |  |
| □ Notice of Intent   | □ Acidize  | Deepen                     | Production (Star  | t/Resume)   | Water Shut-Off                                   |  |
| Subsequent Report  | □ Alter Casing   | Hydraulic Fracturing       | □ Reclamation   | C   | Well Integrity                                   |  |
|  | Casing Repair  | New Construction           | Recomplete  | 5   | Other<br>Site Facility Diagra<br>m/Security Plan |  |
| Final Abandonment Notice   | <ul> <li>Change Plans</li> <li>Convert to Injection</li> </ul>         | Plug and Abandon Plug Back | <ul> <li>Temporarily Aba</li> <li>Water Disposal</li> </ul> |   |  |  |
| 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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection. |  |                            |   |   |  |  |
| See attached Facility Diagram.   |  |                            |   |   |  |  |
| Accepted for Record Purposes.<br>Approval Subject to Onsite Inspection.<br>Date: 2[5]17  |  |                            |   |   |  |  |
| 14. I hereby certify that the foregoing is true and correct.<br>Electronic Submission #364066 verified by the BLM Well Information System  |  |                            |   |   |  |  |
| For COG OPERATING LLC, sent to the Hobbs<br>Committed to AFMSS for processing by PRISCILLA PEREZ on 02/01/2017 (17PP0114SE)  |  |                            |   |   |  |  |
| Name(Printed/Typed) AMANDA AVERY   |  | Title AUTHO                | RIZED REPRESEN  | TATIVE  |  |  |
| Signature (Electronic S  | Submission)  | Date 01/17/20              | 17  |   |  |  |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE   |  |                            |   |   |  |  |
| Approved By  | Tuden  | Title                      | EPS LE  |   | Date 215/17                                      |  |
| 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.   |  |                            |   |   |  |  |
| (Instructions on page 2)<br>** BLM REVISED **   |  |                            |   |   |  |  |
|  |  |                            |   |   |  |  |

