Form 3160-5 (June 2015)

#### UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD Hobbs

FORM APPROVED OMB NO. 1004-0137

Expires: January 31, 2018

5.	Lease Serial No.	
	NMNM114997	

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.

6. If Indian, Allottee or Tribe Name

SUBMIT IN T	7. If Unit or CA/Agreement, Name and/or No. NMNM136125								
Type of Well	ier	· Kr	KR M	ENE	8. Well Name and No. STOVE PIPE FEDI	ERAL COM 21H			
Name of Operator     COG OPERATING LLC	TORMI DAVIS	RE	3*	9. API Well No. 30-025-43839-00	)-X1				
3a. Address ONE CONCHO CENTER 60 MIDLAND, TX 79701-4287	3b. Phone No. (include Ph: 575.748.6946	area code)		10. Field and Pool or E WC025G09S243	xploratory Area 1532M-BONE SPRING				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, S	tate			
Sec 6 T25S R35E 409FNL 47 32.165600 N Lat, 103.399567			/	LEA COUNTY, N	MM				
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA									
TYPE OF SUBMISSION	OF SUBMISSION TYPE OF ACTION								
Notice of Intent	☐ Acidize	□ Deepen		☐ Product	ion (Start/Resume)	☐ Water Shut-Off			
□ Notice of Intent	☐ Alter Casing	☐ Hydraulic Fr	acturing	☐ Reclam	ation	☐ Well Integrity			
Subsequent Report     ■	☐ Casing Repair	■ New Constru	iction	☐ Recomplete		☐ Other			
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Ab	andon	□ Temporarily Abandon					
	☐ Convert to Injection	☐ Plug Back		Water Disposal					
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.  Required Information for the Disposal of Produced Water:  1) Name of formation producing water on lease: Bone Spring 2) Amount of water produced in barriels per day: 2500 BWPD 3) How water is stored on lease: 2 - 500 bbl fiberglass tanks 4) How water is moved to disposal facility: Pipeline 5) Disposal Facility 9 rewell name & number: Brown #5 c) Type of facility or well name & number: Brown #5 c) Type of facility or well name & number: Brown #5 c) Type of facility of well: WDW d) Location by 1/4, 1/4, Section, Township & Range: SWNW, Sec 25-T25S-R36E Disposal Facility #2: a) Facility Operator Name: Owl SWD Operating LLC									
14. I hereby certify that the foregoing is true and correct.  Electronic Submission #404121 verified by the BLM Well Information System  For COG OPERATING LC, sent to the Hobbs  Committed to AFMSS for processing by PRISCILLA PEREZ on 02/28/2018 (18PP0689SE)  Name (Printed/Typed) STORMI DAVIS  Title REGULATORY ANALYST									
- mane (2 - minesa 1 ) pear/ OTOININI L	5,110	7.00	, LOOLA	TORT AN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Signature (Electronic S	Submission)	Date	02/12/20	18					
	THIS SPACE FOR	R FEDERAL OR	STATE O	FFICE U	SE				
Approved By						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

#### Additional data for EC transaction #404121 that would not fit on the form

### 32. Additional remarks, continued

b) Name of facility or well name & number: Madera SWD #1 (SWD-1550) c) Type of facility of well: WDW d) Location by 1/4, 1/4, Section, Township & Range: SESW, Sec 14-T24S-R34E Disposal Facility #3:

a) Facility Operator Name: Owl SWD Operating LLC
b) Name of facility or well name & number: McCloy SWD #1 (SWD-1593)
c) Type of facility of well: WDW
d) Location by 1/4, 1/4, Section, Township & Range: NWSW, Sec 15-T24S-R32E

In the event a temporary change of method or location of disposal is necessary, produced water will be trucked to an authorized disposal well in the geographic vicinity.

# BUREAU OF LAND MANAGEMENT Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

## Disposal of Produced Water From Federal Wells Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approvals

- 1. This agency shall be notified of any change in your method or location of disposal.
- 2. Compliance with all provisions of Onshore Order No. 7.
- 3. This agency shall be notified of any spill or discharge as required by NTL-3A.
- This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
- This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument
- 7 If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
- 8 Disposal at any other site will require prior approval
- 9 Subject to like approval by NMOCD

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