В	EPARTMENT OF THE I UREAU OF LAND MANA	GEMENT			NO. 1004-0137 January 31, 2018
SUNDRY	UREAU OF LAND MANA NOTICES AND REPO	REFERENCE IN		NMNM12090	7
abandoned we	II. Use form 3160-3 (AP	D) for slich proposals	agnus	0. II Indian, Anouch	e or Tribe Name
SUBMIT IN	tructions on page 2	 a 2 0 CD 7. If Unit or CA/Agr 8. Well Name and No EIDER FEDERA 9. API Well No. 9. API Well No. 10. Field and Pool or No. 10. Field and Pool or No. 		eement, Name and/or No.	
1. Type of Well			BBS	8. Well Name and N EIDER FEDER	o. AL 103H
Oil Well Gas Well Ott Ott Ott Ott	Contact:	AMANDA AVERY	<u> </u>	9, API Well No.	
COG PRODUCTION LLC	E-Mail: aavery@co	oncho.com	APK	D 0-025-44631	
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		3b. Phone No. (include ar Ph: 575-748-6940	RECEI	10. Field and Pool of WC025G06S2	r Exploratory Area 223421L-BONE SPR
4. Location of Well (Footage, Sec., T)	11. County or Parish		1, State	
Sec 35 T24S R32E SESW 24 32.167484 N Lat, 103.647522			LEA COUNTY, NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICATE NATU	JRE OF NOTIC	E, REPORT, OR O	THER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
□ Notice of Intent	Acidize	Deepen	D Produ	ction (Start/Resume)	□ Water Shut-Off
_	Alter Casing	🗖 Hydraulic Frac	turing 🔲 Recla	mation	Well Integrity
Subsequent Report	Casing Repair	New Construct	ion 🔲 Reco	mplete	Other
□ Final Abandonment Notice	Change Plans	Plug and Aban	Plug and Abandon Temporarily Abandon Plug Back Water Disposal		Hydraulic Fracture
	Convert to Injection	🗖 Plug Back			
09/15/18 Test annulus to 150 10/18/18 to11/7/18 Perf 9,397 16,822,290 gal fluid. 11/29/18 to12/05/18 Drilled of	7-16,435' (1200). Acdz w	/63,870gal 7 1/2%; frac		sand &	
11/20/10 (0/2/00/10 Dillica 0		-	nas lift system		:
12/6/18 12/7/18 Sot 2 7/8" 6 5	#1_80 tha @ 8 7/11' nac	kor (a) 8 (31' installor			
12/6/18 12/7/18 Set 2 7/8" 6.5	•		guo integotorin.		•
12/6/18 12/7/18 Set 2 7/8" 6.5 3/14/19 Began flowing back 8	•		guo integotori.		•
	•		guo interpretent.		•
	•		guo interfotorin.		•
3/14/19 Began flowing back 8	testing. Date of first pro				•
3/14/19 Began flowing back 8	testing. Date of first pro	duction		on System	•
3/14/19 Began flowing back 8 4. I hereby certify that the foregoing is Corr	true and correct. Electronic Submission #- For COG P Imitted to AFMSS for proce	duction 459108 verified by the B PRODUCTION LLC, sent essing by PRISCILLA PE	-M Well Informati to the Hobbs REZ on 03/26/201	19 (19PP1423SE)	•
3/14/19 Began flowing back 8	true and correct. Electronic Submission #- For COG P Imitted to AFMSS for proce	duction 459108 verified by the B PRODUCTION LLC, sent essing by PRISCILLA PE	-M Well Informati to the Hobbs REZ on 03/26/201	on System 19 (19PP1423SE) EPRESENTATIVE	•
3/14/19 Began flowing back 8 4. I hereby certify that the foregoing is Corr Name (Printed/Typed) AMANDA	true and correct. Electronic Submission # For COG P mitted to AFMSS for proce AVERY	duction 459108 verified by the B PRODUCTION LLC, sent essing by PRISCILLA PE Title A	-M Well Informati to the Hobbs REZ on 03/26/20 [,] UTHORIZED RI	19 (19PP1423SE)	•
3/14/19 Began flowing back 8 4. I hereby certify that the foregoing is Corr	true and correct. Electronic Submission #4 For COG P Inmitted to AFMSS for proce AVERY	duction 459108 verified by the B PRODUCTION LLC, sent essing by PRISCILLA PE Title A	-M Well Informati to the Hobbs REZ on 03/26/20 UTHORIZED RI 3/25/2019	19 (19PP1423SE) Epresentative	•
3/14/19 Began flowing back 8 4. I hereby certify that the foregoing is Corr Name (Printed/Typed) AMANDA	true and correct. Electronic Submission #4 For COG P Inmitted to AFMSS for proce AVERY	duction 459108 verified by the Bi PRODUCTION LLC, sent essing by PRISCILLA PE Title A Date 0 DR FEDERAL OR S1	M Well Informati to the Hobbs REZ on 03/26/20 UTHORIZED RI 3/25/2019 ATE OFFICE	I9 (19PP1423SE) EPRESENTATIVE	
3/14/19 Began flowing back 8 4. I hereby certify that the foregoing is Corr Name (Printed/Typed) AMANDA	true and correct. Electronic Submission #4 For COG P Inmitted to AFMSS for proce AVERY	duction 459108 verified by the Bi PRODUCTION LLC, sent essing by PRISCILLA PE Title A Date 0 DR FEDERAL OR S1	-M Well Informati to the Hobbs REZ on 03/26/20 UTHORIZED RI 3/25/2019	I9 (19PP1423SE) EPRESENTATIVE	MABate ² 7 20
3/14/19 Began flowing back 8 4. I hereby certify that the foregoing is Corr Name (Printed/Typed) AMANDA Signature (Electronic S	true and correct. Electronic Submission #4 For COG P mitted to AFMSS for proce AVERY Submission) THIS SPACE FC	duction 459108 verified by the Bl RODUCTION LLC, sent essing by PRISCILLA PE Title A Date 0 DR FEDERAL OR ST 	M Well Informati to the Hobbs REZ on 03/26/20 UTHORIZED RI 3/25/2019 ATE OFFICE	IS (19PP1423SE) EPRESENTATIVE USE r Record hepard	MAB _{ate} 2 7 20
3/14/19 Began flowing back & 4. I hereby certify that the foregoing is Corr Name (Printed/Typed) AMANDA Signature (Electronic S Approved By inditions of approval, if any, are attached tify that the applicant holds legal or equ	true and correct. Electronic Submission # For COG P mitted to AFMSS for proce AVERY Submission) THIS SPACE FC d. Approval of this notice does nitable title to those rights in the ct operations thereon. U.S.C. Section 1212, make it a	duction 459108 verified by the Bl RODUCTION LLC, sent assing by PRISCILLA PE Title A Date 0 DR FEDERAL OR ST 	M Well Informati to the Hobbs REZ on 03/26/20 UTHORIZED RI 3/25/2019 ATE OFFICE CCEPted fo Jonathon S Carlsbad Fiel gly and willfully to	IS (19PP1423SE) EPRESENTATIVE USE r Record hepard d Office	MABate ² 7 20