Form 3160-5 (June 2015) DE BU	UNITED STATES PARTMENT OF THE II JREAU OF LAND MANA NOTICES AND REPO	S NT ROP -	sbad Fi	eld A	OMB NO Expires: Ja	APPROVED 0. 1004-0137 muary 31, 2018	
Do not use thi	s form for proposals to	drill or to re	enter-en III	Ohha			
abandoned wel	l. Use form 3160-3 (API	D) for such p	proposals.		6. If Indian, Allottee o	r Tribe Name	
SUBMIT IN 1	page 2	7. If Unit or CA/Agreement, Name and/or No. NMNM138694					
1. Type of Well Oil Well 🖸 Gas Well 📋 Oth		8. Well Name and No. DOMINATOR 25 FEDERAL COM 601H					
2. Name of Operator Contact: AMANDA AV COG OPERATING LLC E-Mail: aavery@concho.com			30		9. API Well No. 30-025-44814-0	API Well No. 30-025-44814-00-X1	
3a. Address ONE CONCHO CENTER 600 MIDLAND, TX 79701-4287	3b. Phone No Ph: 575-74	3b. Phone No. (include appro CCD Ph: 575-7480BBS		10. Field and Pool or Exploratory Area WC-025 G-08 S203435D-WOLFCAMF			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 25 T25S R33E SESE 280 32.095032 N Lat, 103.519562		LEA COUNTY, NM					
12. CHECK THE AP	PROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE	, REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
D Notice of Intent		Dee	pen	Produc	tion (Start/Resume)	U Water Shut-Off	
	Alter Casing	🗖 Hyd	raulic Fracturing	🗖 Reclan	nation	U Well Integrity	
Subsequent Report	Casing Repair		Construction	Recomplete		🛛 Other Hydraulic Fracture	
Final Abandonment Notice	Change Plans Convert to Injection	🗆 Plug 🗖 Plug	and Abandon	Tempo Water 1			
11/11/18 Test annulus to 1500 12/3/18 to 12/10/18 Perf 12,78 &8,002,851 gal fluid. 1/16/19 - 1/17/19 Drilled out (	96-17,140' (800). Acdz w	/71,670 gal 7	1/2%; frac w/ 8,		and		
1/23/19 Set 2 7/8" 6.5# L-80 th			alled gas lift syst	em.			
2/22/19 Began flowing back &	testing. Date of first pro	duction.					
<u> </u>		······································	<u></u>				
For COG OPERATING I			d by the BLM Well Information System LC, sent to the Hobbs SCILLA PEREZ on 04/17/2019 (19PP1584SE)				
Name(Printed/Typed) AMANDA AVERY			Title AUTHORIZED REPRESENTATIVE				
Signature (Electronic S	ubmission)		Date 04/17/2	019		· .	
	THIS SPACE FO	DR FEDERA	L OR STATE	OFFICE U	ISE		
Approved By		Title Accepted f			APR 2 3 20		
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.			Jonathon Shepard Carlsbad Field Office Office				
itle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a tatements or representations as	crime for any pe to any matter w	rson knowingly and ithin its jurisdiction.	willfully to m	ake to any department or	agency of the United	
Instructions on page 2) ** BLM REVI	SED ** BLM REVISED	D ** BLM RI	EVISED ** BLN	I REVISE	D ** BLM REVISE	D ** KZ	

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