BUREAU OF LAND MANAGEMENT       Expires: January 31, 2018         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.       S. Lease Serial No. NMNM121958         SUBMIT IN TRIPLICATE - Other Instructions on page 2       I. If Indian, Allottee or Tribe Name         SUBMIT IN TRIPLICATE - Other Instructions on page 2       7. If Unit or CA/Agreement, Name and NMNM138694         I. Type of Well       Gas Well       Other         Sold Well       Gas Well       Other         Name of Operator COG OPERATING LLC       Contact: AMANDA AVERY E-Mail: aavery@concho.com       9. API Well No. 30-025-44729-00-X1         a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287       3b. Phone No. (include area code) Ph: 575-748-6940       10. Field and Pool or Exploratory Area WC-025 G-08 S203435D-WO         4. Location of Well       (Footage, Sec. T. R. M., or Survey Description)       11. County or Parish, State LEA COUNTY, NM         32.095024 N Lat, 103.525970 W Lon       11. County or Parish, State LEA COUNTY, NM       12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION       IP Acidize       Deepen       Production (Start/Resume)       Water Shi	Form 3160-5 (June 2015)	UNITED STATES PARTMENT OF THE IN		000			FORM AP	1004-0137
Aller of formation of the set of the se	BI	JREAU OF LAND MANAG	GEMENT			5. Lease Seria	al No.	ary 31, 2018
Aller of formation of the set of the se	Do not use thi abandoned wel	s form for proposals to I. Use form 3160-3 (APL	drill or to re-enter a )) for such proposa		OCD	6. lf Indian, A	Allottee or T	ribe Name
Aller of formation of the set of the se	SUBMIT IN 1	RIPLICATE - Other inst	ructions on page 2		<i>2019</i>	7. If Unit or C NMNM13	CA/Agreeme 38694	ent, Name and/or No
3h       Address       10       Field and Pool or Exploratory Acts         MDLAND, TX. 79701-4287       Ph: 575-748-6940       WiC-025 G-08 S203435D-WO         4. Lession of Well       (Poolnge, Sec. T. R. M. or Survey Description)       11       Country Parish, State         3c. 258 S2 SESSW 200FSL 2014FWL       32.095024 N Lat. 103.525970 W Lon       11       Country Parish, State         12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION       TYPE OF ACTION         II. Subsequent Report       Acidize       Deepen       Production (Start/Resume)       Water Shi         IS ubsequent Report       Chang Repair       New Construction       Recomplete       Other         II. Subsequent Report       Chang Repair       New Construction       Recomplete       Other         II. Subsequent Report       Chang Repair       New Construction       Recomplete       Other         II. Subsequent Report       Chang Repair       Plug Back       SWater Disposal         II. Describ Proposed or Completed Openics: Early water and periodic Relation. Including tablesquering on wat and approximate duation differentiation and measured and two vertical deprice and periodic Relation and measured and two vertical deprice and the file define table of the solution of the openicon result is a multiple coupletion or recompletion or recomplete internation and the solutis the file define table define table of the int	<ol> <li>Type of Well</li> <li>Oil Well Gas Well Oth</li> </ol>			1014	ENEL	8. Well Name DOMINAT		DERAL COM 707H
ONE CONCHO CENTER 600 WILLINDIS AVENUE       Ph: 575-748-6940       WC-025 G-08 S203435D-WO         4       Location of Well (Florage, Sec. 7. K. M. or Survey Description)       11. County or Parish, State         Sec 25 725S R33E SESW 280FSL 2614FWL       S2 095024 N Lat, 103 252970 W Lon       LEA COUNTY, NM         32 095024 N Lat, 103 252970 W Lon       TYPE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         B Notice of Intent       Actidize       Deepen       Production (Start/Resume)       Well Photos         B Notice of Intent       Change Repair       New Construction       Reclamation       Well Integ         B Subsequent Report       Change Repair       New Construction       Recomplete       Other         B Notice of Intent       Change Phane       Production (Start/Resume)       Well Three         B Notice of Intent       Change Phane       Production of the property Anatoon       Recomplete       Other         B Notice of Intent       Change Phane       Plug adA dandon       Tomporarity Abandon       Tomporarity Abandon         B Subsequent Report       Change Phane       Plug adA       Water Disposal       Start adameter the Induction of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a form 3160-4 must field on thease: Bonone Origing in barriss part 249.00 DWpd -			AMANDA AVERY	REU		9. API Well 1 30-025-4		X1
4       Location of Well       (Poolage, Sec., T., R. M. or Survey Description)         Sec 25 T25S R33E SESW 280F5L 2614FWL       LEA COUNTY, NM         32.095024 N Lat, 103.525970 W Lon       IL County or Parish, State         I2. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         II. County or Parish, State       LEA COUNTY, NM         ISUbsequent Report       Acidize       Deepen         I Alter Casing       IVPE OF ACTION       Water Shn         II. Subsequent Report       Casing Repair       New Construction       Reclamation       Well Integ         III. Subsequent Report       Casing Repair       IVe Construction       Reclamation       Other         III. Subsequent Report       Charge Plans       IPlug and Abandon       Temporarily Abandon         III. Subsequent Notice       Charge Plans       IPlug and Abandon methods and	ONE CONCHO CENTER 60	WILLINOIS AVENUE						
32.095024 N Lat, 103.525970 W Lon         12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION         TYPE OF SUBMISSION         Subsequent Report         Subsequent Report       Casing Repair       Plog and Abandon       Perioduction (Start/Resume)       Water Shi         Subsequent Report       Casing Repair       Plog and Abandon       Temporarily Abandon       Other         Final Abandonment Notice       Casing Pairs       Plog and Abandon       Temporarily Abandon       Other         13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting due of aur proposed work and approximate duration of the proposed or Completed Operation: Clearly state all pertinent details.       Bwater Disposal         13. Describe Proposed or Completed Operation: Clearly state all pertinent details.       Bwater Disposal       Bwater Disposal         14. The work with the work will be performed or provide the Bond No. on file with BL/MBIA. Required abbeguent report must be filed with 3b d       Bwater Disposal       Bwater Disposal         13. Describe Proposed or Completed Operation: Clearly state all pertinent data the bies of more of the Bond No. on file with BL/MBIA. Required abbeguent report must be filed with 3b d       Bear State Stat		, R., M., or Survey Description)	) <u></u>			11. County or	r Parish, Sta	te
TYPE OF SUBMISSION       TYPE OF ACTION         Image: Subsequent Report               Acidize             Deepen             Production (Start/Resume)             Well Inter          Image: Subsequent Report              Casing Repair              New Construction              Reclamation              Well Inter          Image: Subsequent Report              Casing Repair              New Construction              Recomplete              Other          Image: Subsequent Report              Change Plans               Plug and Abandon              Temporarity Abandon               Other						LEA COI	UNTY, NN	М
Solution of Intent Acidize Deepen Production (Start/Resume) Water Sh Acidize Deepen Report Atter Casing Repair New Construction Recomplete Other Casing Repair Report Casing Repair Report Casing Repair Reclamation Recomplete Other Casing Repair Reclamation Recomplete Other Construction Recomplete Convert to Injection Plug Back Water Disposal Converted Recomplete Convert to Injection Recomplete Convert to Injection Recomplete Converted Recomplete Recomplete Converted Recomplete Converted Recomplete Converted Recomplete Converted Recomplete Converted Recomplete Recomp	12. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICATE NA	TURE OF	NOTICE,	REPORT, O	R OTHE	R DATA
B Notice of Intent       Alter Casing       Hydraulic Fracturing       Reclamation       Well Integ         Casing Repair       New Construction       Recomplete       Other         Final Abandonment Notice       Change Plans       Plug and Abandon       Temporarily Abandon         Convert to Injection       Plug Back       B Water Disposal         13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration of the transfers and of the proposal is to deepen directionally, give auburdate locations and measured and tree vertical depths of all pertinent markers and of the performed or provide the Book No. on file with BUMPIA. Required subsequent report markers and of the determined that the site is ready for final inspection.         Required information for disposal water:       1) Name of formation producing water on lease: Bone Spring-         2) Amount of water protecting water on lease: Bone Spring-       2) Smouth of tables preducing the Bard Stylestern-         3) Disposal Facility 47       Bred to lapsesi: Book of the Book Stylestern-         4) How water is stored to disposal: Piped to nearest SWD System       5) Disposal Facility 47         a) Facility Operator Name: Bc&D Operating Inc.       14. Thereby certify that the foregoing is true and correct.         14. Thereby certify that the foregoing is true and correct.       Electronic Submission #466203 verified by the BLM Well Information System For COG OPERATINE LCC, sent to the Hobbs. <tr< td=""><th>TYPE OF SUBMISSION</th><td></td><td></td><td>TYPE OF</td><td>ACTION</td><td></td><td></td><td></td></tr<>	TYPE OF SUBMISSION			TYPE OF	ACTION			
Alter Casing     Hydraulic Fracturing     Reclamation     Hydraulic Fracturing     Reclamation     Head and on the series of the series o	<b>53</b> Notice of Intent	Acidize	Deepen		Product	tion (Start/Res	ume)	□ Water Shut-Off
Cashing keptan Cashi	_	Alter Casing	🗖 Hydraulic F	Hydraulic Fracturing		Reclamation		Well Integrity
Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Convert to Injection     Convert to Injection     Plug Back     Water Disposal     Convert to Injection     Convert to Injectin     Convert to Injectio	Subsequent Report	Subsequent Report Casing Repair New Construct		uction	C Recom	olete	1	Other
13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration the If the program of the involved operationally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and a Attach the Bond under which the work will be performed or provide the Bond Moo. on file with BLM/RIAL. Required subsequent reports must be filed utins 30 do 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 testing has been completed. Final Abandhomment Noicos must be filed only after all requirements, including reclamation, have been completed and the operator be determined that the site is ready for final inspection.         Required information producing water on lease: Bone Spring	Final Abandonment Notice	Change Plans	Plug and At	andon	Tempor	rarily Abandon		
If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and nearing and true 'errical depths of all perintent markers and a Attach the Bond widen will be performed or provide the Bond No. on file with BUM/BIA. Required subsequent reports must be filed testing bas been completed. Final Attandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator before the site is ready for final inspection. Required information for disposal water: 1) Name of formation producing water on lease: Bone Spring 2) Amount of water producing water on leases: Bone Spring 3) How water is moved to disposal: Piped to nearest SWD System 5) Disposal Facility #1 a) Facility Operator Name: Owl SWD, LLC b) Name of facility or well: wDW d) Location by 1/4, 1/4, Sec, T & R: NESW, Sec 36-T25S-R36E Disposal Facility #2 a) Facility Operator Name: BC&D Operating Inc. 14. 1 hereby certify that the foregoing is true and correct. Electronic Submission #466203 verified by the BLM Well Information System For CGO OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PAMELLA HERNANDEZ on 05/21/2019 (19PGH0016SE) Name (Printed/Typed) AMANDA AVERY AMANDA AVERY Tule AUTHORIZED REPRESENTATIVE Signature (Electronic Submission) Date 05/21/2019 Date 05/21/2019 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 Approved By		Convert to Injection	🗖 Plug Back	🔀 Water		Disposal		
Electronic Submission #466203 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PAMEULA HERNANDEZ on 05/21/2019 (19PGH0016SE)         Name (Printed/Typed)       AMANDA AVERY         Title       AUTHORIZED REPRESENTATIVE         Signature       (Electronic Submission)         Date       05/21/2010         Mapproved By       Title         Approved By       Title         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.       Title         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 determinent or agency of the Un States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction       or agency of the Un	<ul> <li>2) Amount of water producing</li> <li>3) How water is stored on lease</li> <li>4) How water is moved to disp</li> <li>5) Disposal Facility #1</li> <li>a) Facility Operator Name: O</li> <li>b) Name of facility or well nam</li> <li>c) Type of facility or well: WD</li> <li>d) Location by 1/4,1/4, Sec, T</li> <li>Disposal Facility #2</li> </ul>	in barrels per day: 500 b e: 2-500 BBL Fiberglass osal: Piped to nearest SV wI SWD, LLC e & number: Maralo Sho W & R: NESW, Sec 36-T25	wpd tank WD System les B #2 (SWD-112	27)				
For COG OPERATING LC, sent to the Hobbs Committed to AFMSS for processing by PAMELLA HERNANDEZ on 05/21/2019 (19PGH0016SE)         Name (Printed/Typed)       AMANDA AVERY       Title       AUTHORIZED REPRESENTATIVE         Signature       (Electronic Submission)       Date       -05/21/2019         THIS SPACE FOR FEDERAL OR SPATE OFFICE USE RECURD         Approved By       Title       HAY 2 1 2019       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	14. I hereby certify that the foregoing is	true and correct.			<u> </u>			
Name (Printed/Typed)       AMANDA AVERY       Title       AUTHORIZED REPRESENTATIVE         Signature       (Electronic Submission)       Date       05/21/2010         THIS SPACE FOR FEDERAL OR SPATE OFFICE USE RECURD         Approved By	A	For COG (	OPERATING LLC, se	nt to the H	obbs	n System	665)	
Signature       (Electronic Submission)       Date       05/21/2010         THIS SPACE FOR FEDERAL OR SPATE OFFICE USE RECURD								
THIS SPACE FOR FEDERAL OR SPATE OFFICE USE RECURD         Approved By								
Approved By       Title       HAV 2 1 2019       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       Description       Date         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 Un States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction       Office       Date         (Instructions on page 2)       Date       Date       Date       Date	Signature (Electronic S					RERECTO		
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. 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 Un States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction (Instructions on page 2)			IN FEDERAL UR					<u> </u>
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. 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 Un States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction (Instructions on page 2)	Approved By		Title		LAV 01	2010		Date
States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction	Conditions of approval, if any, are attached certify that the applicant holds legal or equ	itable title to those rights in the	not warrant or subject lease	Pe	sed A	InAst		····
(Instructions on page 2) ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** 1	Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a tatements or representations as	crime for any person kno to any matter within its j	wingly and	willfully to m	ake to any depar	tmen or ag	ency of the United
DLINI KEVIJED DLINI KEVIJED BLINI KEVIJED BLINI KEVIJED BLINI KEVIJED J 🦯	(Instructions on page 2)							** -
	BLW KEV	ISED BLIN KEVISEL		BLM	KEVIJEI	) DLIN KI	TAISED	V-

## Additional data for EC transaction #466203 that would not fit on the form

с.

يب ق

۰.

32. Additional remarks, continued

The second s

b) Name of facility or well name & number: West Jal B #1 (SWD 1601)
c) Type of facility or well: WDW
d) Location by 1/4,1/4, Sec, T & R: Unit J Sec 17-T25S-R36E
Disposal Facility #3
e) Facility Operator Name: BC&D Operating Inc`
f) Name of facility or well name & number: West Jal B Deep Well #1 (SWD 1482)
g) Type of facility or well: WDW
h) Location by 1/4,1/4, Sec, T & R: Unit H Sec 17-T25S-R36E

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.