Form 3160-5 (June 2015)

## UNITED STATES CARISBAD Field Office FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 BUREAU OF LAND MANAGEMENT OCD Hobbs. Lease Serial No. 1004-0137 Expires: January 31, 2018 St. Lease Serial No. 1004-0137 Expires

| 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.   |  |                       |                 |  | NMNM0319697  6. If Indian, Allottee or Tribe Name |                      |
|--|--|-----------------------|-----------------|--|---|----------------------|
|  |  |                       |                 |  |   |                      |
| SUBMIT IN TRIPLICATE - Other instructions on page 2   SOUND  |  |                       |                 |  | 8. Well Name and No.<br>PATTERSON B 52 FEDERAL 2H |                      |
| 2. Name of Operator COG OPERATING LLC  2. Name of Operator COG OPERATING LLC  3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287  4. Location of Well (Footage, Sec., T, R, M., or Survey Description)   |  |                       |                 |  | 9. API Well No.<br>30-025-40773-00-S1             |                      |
| 3a. Address<br>ONE CONCHO CENTER 60<br>MIDLAND, TX 79701-4287  | 3b. Phone No. (<br>Ph: 575-689-                            | nclude areas and 3057 | <u> </u>        | 10. Field and Pool or Exploratory Area<br>LUSK |   |                      |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)   |  |                       |                 |  | 11. County or Parish, State                       |                      |
| Sec 5 T19S R32E NENE 330FNL 330FEL   |  |                       |                 |  | LEA COUNTY, NM                                    |                      |
| 12. CHECK THE AI   | PPROPRIATE BOX(ES)   | TO INDICATI           | E NATURE O      | F NOTICE,                                      | REPORT, OR OTH                                    | IER DATA             |
| TYPE OF SUBMISSION   | TYPE OF ACTION   |                       |                 |  |   |                      |
| Notice of Intent   | ☐ Acidize  | □ Deepe               | n               | ☐ Production (Start/Resume)                    |   | ■ Water Shut-Off     |
| _  | ☐ Alter Casing   | ☐ Hydra               | ulic Fracturing | ■ Reclamation                                  |   | ■ Well Integrity     |
| ☐ Subsequent Report  | □ Casing Repair  | □ New C               | Construction    | □ Recomplete                                   |   | Other                |
| ☐ Final Abandonment Notice   | ☐ Change Plans   | 🗖 Plug a              | nd Abandon      | □ Tempor                                       | arily Abandon                                     | Venting and/or Flari |
|  | ☐ Convert to Injection                                     | 🗖 Plug B              | ack             | ■ Water Disposal                               |   | **5                  |
| testing has been completed. Final Abdetermined that the site is ready for fit COG OPERATING LLC RESFFROM 10/24/19 TO 01/22/20. # OF WELLS TO FLARE: 1 PATTERSON B52 FEDERAL BBLS OIL/DAY: 36 MCF/DAY: 60 REASON: UNPLANNED MIDS  | inal inspection. PECTFULLY REQUEST T COM #2H: 30-025-40773 | O FLARE AT 1          | HE PATTERS      |  | -   |                      |
| 14. I hereby certify that the foregoing is   |  |                       |                 |  | 0   |                      |
| _  | Electronic Submission #4 For COG (                         | OPERATING LLC         | , sent to the h | lobbs  | •   |                      |
| Committed to AFMSS for processing by PRISCILLA PEREZ on Name(Printed/Typed) KELLI CARRE Title OPERAT   |  |                       |                 |  | ` '   |                      |
| Name (Printed/Typed) KELLI CARRE   |  | -   "                 | ide OPERA       | HONS ENG                                       | SINEERING TECH I                                  |                      |
| Signature (Electronic S  | ubmission)   | r                     | Pate 10/24/2    | 019  |   |                      |
|  | THIS SPACE FO  | R FEDERAL             | OR STATE        | OFFICE US                                      | SE  |                      |
| /s/ Jon  | /s/ Jonathon Shepard                                       |                       |                 | Title PC                                       |   |                      |
| Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction of t | Office Off   | )                     |                 |  |   |                      |
| Title 18 U.S.C. Section 1001 and Title 43 I  |  |                       |                 | willfully to ma                                | ke to any department or a                         | agency of the United |

(Instructions on page 2)
\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

## **BUREAU OF LAND MANAGEMENT**

Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

## **Conditions of Approval to Flare Gas**

- 1. Approval not to exceed 180 days from date of submission.
- 2. All flaring under this request is considered to be "avoidably lost" per 43 CFR 3179.4(a)(2)(i iii). Volumes for avoidably lost gas shall be reported on OGOR "B" reports as disposition code "33".

## **Exceptions:**

- a. The first 24 hours of a temporary emergency flare is considered "unavoidably lost" and is therefore royalty free (43 CFR 3179.103(a)). Flared volumes that are considered unavoidably lost are not to be included in Sundry Notice (Form 3160-5). These Volumes are not royalty bearing and shall be reported on OGOR "B" as either disposition code "21" or "22".
- b. If the operator believes that the flared volumes were "unavoidably lost", the operator can submit a request via Sundry Notice (Form 3160-5) with justification for an exception in accordance with 43 CFR 3179.4, 3179.101 3179.104.