

MM 2/28/2018

RECEIVED: 2/05/2018	REVIEWER: MAM	TYPE: OLM	APP NO: DMAM180363961
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ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Geological & Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505

**ADMINISTRATIVE APPLICATION CHECKLIST**

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Applicant: COG OPERATING LLC

OGRID Number: 229137

Well Name: JACK FEDERAL #2H 3H

API: 30-015-42132

Pool: WILDCAT G-03 S262631M: BONE SPRING

Pool Code: 200 100-5 97818

SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW

1) **TYPE OF APPLICATION:** Check those which apply for [A]

A. Location - Spacing Unit - Simultaneous Dedication

☐ NSL☐ NSP (PROJECT AREA)☐ NSP (PRORATION UNIT)☐ SD

B. Check one only for [I] or [II]

[I] Commingling - Storage - Measurement

☐ DHC☐ CTB☐ PLC☐ PC☐ OLS☒ OLM

[II] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery

☐ WFX☐ PMX☐ SWD☐ IPI☐ EOR☐ PPR2) **NOTIFICATION REQUIRED TO:** Check those which apply.A. ☐ Offset operators or lease holdersB. ☒ Royalty, overriding royalty owners, revenue ownersC. ☐ Application requires published noticeD. ☐ Notification and/or concurrent approval by SLOE. ☒ Notification and/or concurrent approval by BLMF. ☐ Surface ownerG. ☐ For all of the above, proof of notification or publication is attached, and/or,H. ☐ No notice required**FOR OCD ONLY**☐ Notice Complete
☐ Application
 Content
 Complete

3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

BOBBIE GOODLOE

Print or Type Name

Signature

FEBRUARY 1, 2018

Date

575-748-6952

Phone Number

bgoodloe@concho.com

e-mail Address



February 28, 2018

Attn: Michael McMillan
NM Oil Conservation Division
1220 South Saint Francis Drive
Santa Fe, New Mexico 87505

Re: Application for Administrative Approval
Off-lease Measurement – Oil Only

Dear Mr. McMillan,

COG Operating, LLC, respectfully requests approval for Off-lease Measurement for oil only for the following well:

Jack Federal #2H
API #30-015-42132
Wildcat G-03 S262631M; Bone Spring
SHL 240' FNL 330' FWL, Sec 31-T25S-R27E
Eddy County

Jack Federal #3H
API #30-015-42133
Wildcat G-03 S262631M; Bone Spring
SHL 206' FNL 2360' FWL, Sec 31-T25S-R27E
Eddy County

The oil production from these wells may be transported by truck to either the Red Hills Offload Station, located in Unit O, Section 4-T26S-R32E, or the Jal Offload Station, located in Unit D, Section 4-T26S-R37E, Lea County in the event the CTB on lease is over capacity or in the case of battery or pipeline repairs. Oil will remain segregated and will be measured by lact meter when offloading at the Offload Stations. Notices have been sent to all interest owners as required.

Also, please see the attached Administrative Application Checklist, plats for referenced well, proof of notice to interest owners, diagrams of site facility, and map with lease boundaries showing wells and facility as well as copies of FMP sundries to BLM.

******Please note that this is a correction to the application dated February 5, 2018 to include the production from Jack Federal #3H well which is also included in this lease.**

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in blue ink, appearing to read "Bobbie Goodloe".

Bobbie Goodloe
Regulatory Analyst

Enclosures

CORPORATE ADDRESS

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND, TEXAS 79701
P432.683.7443 | F432.683.7441

ARTESIA WEST OFFICE

2208 MAIN STREET | ARTESIA, NEW MEXICO 88210
P575.748.6940 | F575.746.2096

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 REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Applicant: <u>COG OPERATING LLC</u>	OGRID Number: <u>229137</u>
Well Name: <u>JACK FEDERAL #2H</u>	API: <u>30-015-42132</u>
Pool: <u>WILDCAT G-03 S262631M: BONE SPRING</u>	Pool Code: <u>97818</u>

**SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION
 INDICATED BELOW**

1) TYPE OF APPLICATION: Check those which apply for [A]

A. Location – Spacing Unit – Simultaneous Dedication

☐ NSL ☐ NSP (PROJECT AREA) ☐ NSP (PRORATION UNIT) ☐ SD

B. Check one only for [I] or [II]

[I] Commingling – Storage – Measurement

☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☒ OLM

[II] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery

☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR

2) NOTIFICATION REQUIRED TO: Check those which apply.

- A. ☐ Offset operators or lease holders
 B. ☒ Royalty, overriding royalty owners, revenue owners
 C. ☐ Application requires published notice
 D. ☐ Notification and/or concurrent approval by SLO
 E. ☒ Notification and/or concurrent approval by BLM
 F. ☐ Surface owner
 G. ☐ For all of the above, proof of notification or publication is attached, and/or,
 H. ☐ No notice required

FOR OCD ONLY

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Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

BOBBIE GOODLOE

Print or Type Name

Signature

FEBRUARY 26, 2018

Date

575-748-6952

Phone Number

bgoodloe@concho.com

e-mail Address

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-42132	² Pool Code 97818	³ Pool Name Wildcat G-03 S262631M; Bone Spring
⁴ Property Code 38565	⁵ Property Name Jack Federal	⁶ Well Number 2H
⁷ OGRID No. 229137	⁸ Operator Name COG Operating, LLC	⁹ Elevation 3241' GR

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
1	31	25S	27E	1	240	North	330	West	Eddy

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
4	31	25S	27E	4	361	South	401	West	Eddy

¹² Dedicated Acres 158.4	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

				<p>¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p><i>Bobbie J Goodloe</i> 2-28-18 Signature Date</p> <p>BOBBIE J GOODLOE Printed Name</p> <p>bgoodloe@concho.com E-mail Address</p>
				<p>"SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>REFER TO ORIGINAL PLAT</p> <p>Date of Survey Signature and Seal of Professional Surveyor</p>
				Certificate Number

30-015-42132 JACK FEDERAL #002H [38565]

General Well Information

Operator: [229137] COG OPERATING LLC
Status: Active
Well Type: Oil
Work Type: New
Direction: Horizontal
Multi-Lateral: No
Mineral Owner: Federal
Surface Owner:
Surface Location: L-31-25S-27E Lot 3 340 FNL 330 PVL
Lat/Long: 32 0928612 -104.2368927 NAD83
GL Elevation: 3241
KB Elevation:
DF Elevation:
Sing/Mult Compl: Single
Potash Waiver: False

Earliest Production in OCD Records: 7/2014 **Last** 12/2017 [Show All Production](#) [Export to Excel](#)

Time Frame	Production				Injection				
	Oil(BBL/S)	Gas(MCF)	Water (BBL/S)	Days P/I	Water (BBL/S)	Co2(MCF)	Gas(MCF)	Other	Pressure
2017									
WC-015 G-03 S252636M;BONE SPRING									
Jan	2322	16470	4368	31	0	0	0	0	0
Feb	2076	14769	4272	28	0	0	0	0	0
Mar	2002	15526	4701	31	0	0	0	0	0
Apr	2019	14146	4315	30	0	0	0	0	0
May	2005	15510	4418	31	0	0	0	0	0
Jun	1690	12544	4192	30	0	0	0	0	0
Jul	1840	13391	4633	31	0	0	0	0	0
Aug	1681	13464	3475	30	0	0	0	0	0
Sep	1921	16342	4252	30	0	0	0	0	0
Oct	1856	13938	3441	31	0	0	0	0	0
Nov	1815	12366	2131	30	0	0	0	0	0
Dec	1600	12989	2577	31	0	0	0	0	0

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Applicant: <u>COG OPERATING LLC</u>	OGRID Number: <u>229137</u>
Well Name: <u>JACK FEDERAL #3H</u>	API: <u>30-15-42133</u>
Pool: <u>WILDCAT G-03 S262631M: BONE SPRING</u>	Pool Code: <u>97818</u>

**SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION
 INDICATED BELOW**

- 1) **TYPE OF APPLICATION:** Check those which apply for [A]
- A. Location – Spacing Unit – Simultaneous Dedication
☐ NSL ☐ NSP (PROJECT AREA) ☐ NSP (PRORATION UNIT) ☐ SD
- B. Check one only for [I] or [II]
- [I] Commingling – Storage – Measurement
☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☒ OLM
- [II] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR

2) **NOTIFICATION REQUIRED TO:** Check those which apply.

- A. ☐ Offset operators or lease holders
 B. ☒ Royalty, overriding royalty owners, revenue owners
 C. ☐ Application requires published notice
 D. ☐ Notification and/or concurrent approval by SLO
 E. ☒ Notification and/or concurrent approval by BLM
 F. ☐ Surface owner
 G. ☐ For all of the above, proof of notification or publication is attached, and/or,
 H. ☐ No notice required

FOR OCD ONLY

- ☐ Notice Complete
☐ Application
 Content
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- 3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

BOBBIE GOODLOE

Print or Type Name

FEBRUARY 26, 2018

Date

575-748-6952

Phone Number

bgoodloe@concho.com

e-mail Address


 Signature

District I
1625 N. French Dr., Hobbs, NM 88240
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WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-42133		² Pool Code 97818		³ Pool Name WILDCAT G-03 S262631M; BONE SPRING	
⁴ Property Code 38565		⁵ Property Name JACK FEDERAL			⁶ Well Number 3H
⁷ OGRID No. 229137		⁸ Operator Name COG OPERATING LLC			⁹ Elevation 3267' GR

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot 1 dn	Feet from the	North/South line	Feet from the	East/West line	County
C	31	25S	27E		206	NORTH	2360	WEST	EDDY

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot 1 dn	Feet from the	North/South line	Feet from the	East/West line	County
N	31	25S	27E		331	SOUTH	2008	WEST	EDDY
¹² Dedicated Acres 160		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

	<p>¹⁶ OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p><i>Bobbie J Goodloe</i> 2-28-18 Signature Date</p> <p>BOBBIE J GOODLOE Printed Name</p> <p>bgoodloe@concho.com E-mail Address</p>	
	<p>¹⁷ SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>REFER TO ORIGINAL PLAT</p> <p>Date of Survey Signature and Seal of Professional Surveyor:</p>	
	<p>Certificate Number</p>	

30-015-42133 JACK FEDERAL #003H [38565]

General Well Information

Operator: [229137] COG OPERATING LLC
 Status: Active
 Well Type: Oil
 Work Type: New
 Direction: Horizontal
 Multi-Lateral: No
 Mineral Owner: Federal
 Surface Owner:
 Surface Location: C-31-259-27E 206 FNL 2360 FWL
 Lat/Long: 32 0929871,-104 2303391 NAD83
 GL Elevation: 3267
 KB Elevation:
 DF Elevation:
 Sing/Mult Compl: Single
 Potash Waiver: False

Earliest Production in OCD Records: 11/2014 Last 12/2017 [Show All Production](#) [Export to Excel](#)

Time Frame	Production				Injection				
	Oil(BBLS)	Gas(MCF)	Water (BBLS)	Days P/I	Water (BBLS)	Co2(MCF)	Gas(MCF)	Other	Pressure

2017

WC-015 G-03 S2526J6M, BONE SPRING

Jan	2816	23358	3250	31	0	0	0	0	0
Feb	2505	21052	2963	28	0	0	0	0	0
Mar	2672	23914	3010	31	0	0	0	0	0
Apr	2422	21952	2973	30	0	0	0	0	0
May	2283	22278	2719	31	0	0	0	0	0
Jun	2067	20568	2402	30	0	0	0	0	0
Jul	2168	20972	2311	31	0	0	0	0	0
Aug	2106	21613	2495	31	0	0	0	0	0
Sep	2008	21898	2553	30	0	0	0	0	0
Oct	2013	20982	2611	31	0	0	0	0	0
Nov	1840	19415	2456	30	0	0	0	0	0
Dec	1550	13313	2532	31	0	0	0	0	0

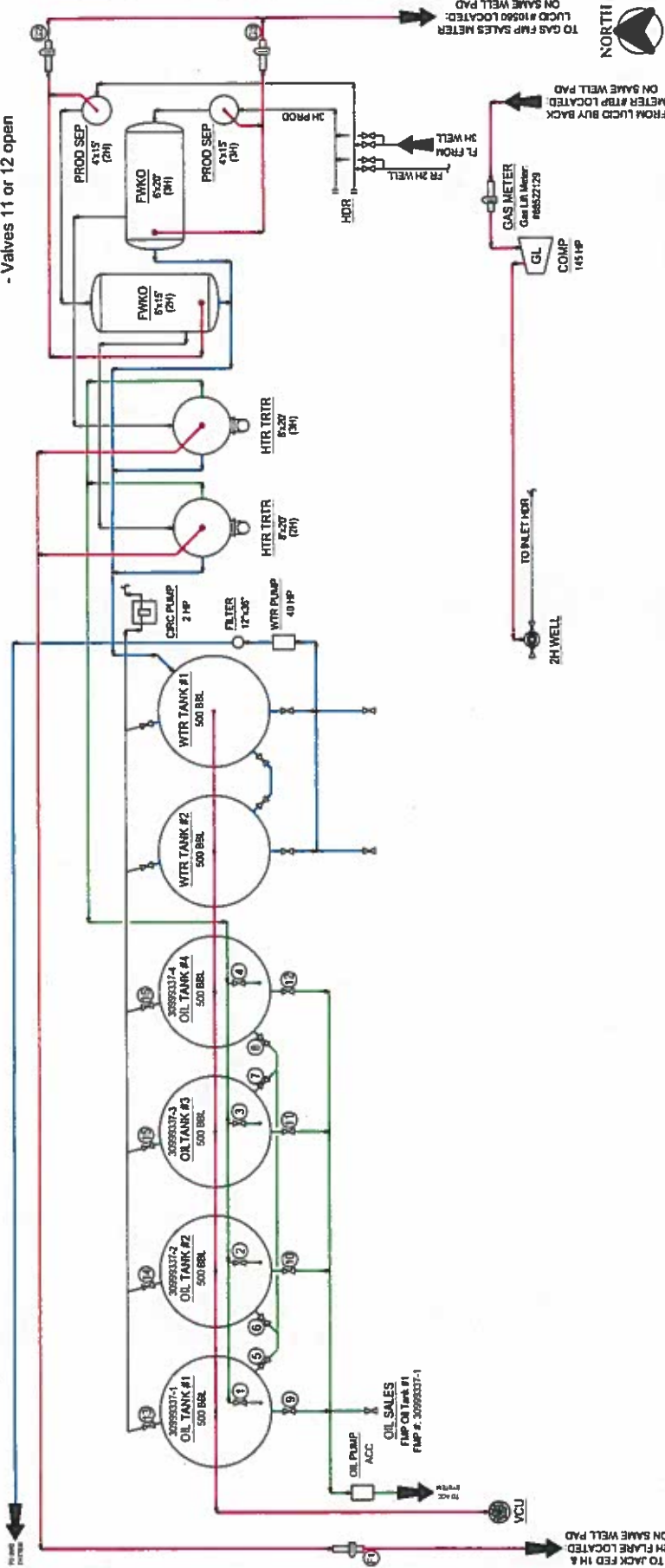
WELLS:
JACK FEDERAL #002H: 30-015-42132
JACK FEDERAL #003H: 30-015-42133

Production Phase - Oil Tank #1

- Valve 1 open
- Valves 2 and 3 closed
- Valves 4, 5, and 6 open
- Valves 7, 8, and 9 closed
- Valve 10 open
- Valves 11 and 12 closed

Sales Phase - Oil Tank #1

- Valve 1 closed
- Valves 2 or 3 open
- Valve 4 closed
- Valves 5 and 6 open
- Valve 7 open
- Valves 8 and 9 closed
- Valve 10 closed
- Valves 11 or 12 open

[illegible]

Jack Federal 2H Battery

Legend

- Jack Federal
- Lucid Gas Sales Meter #10560

Jack Federal 2H - SHL

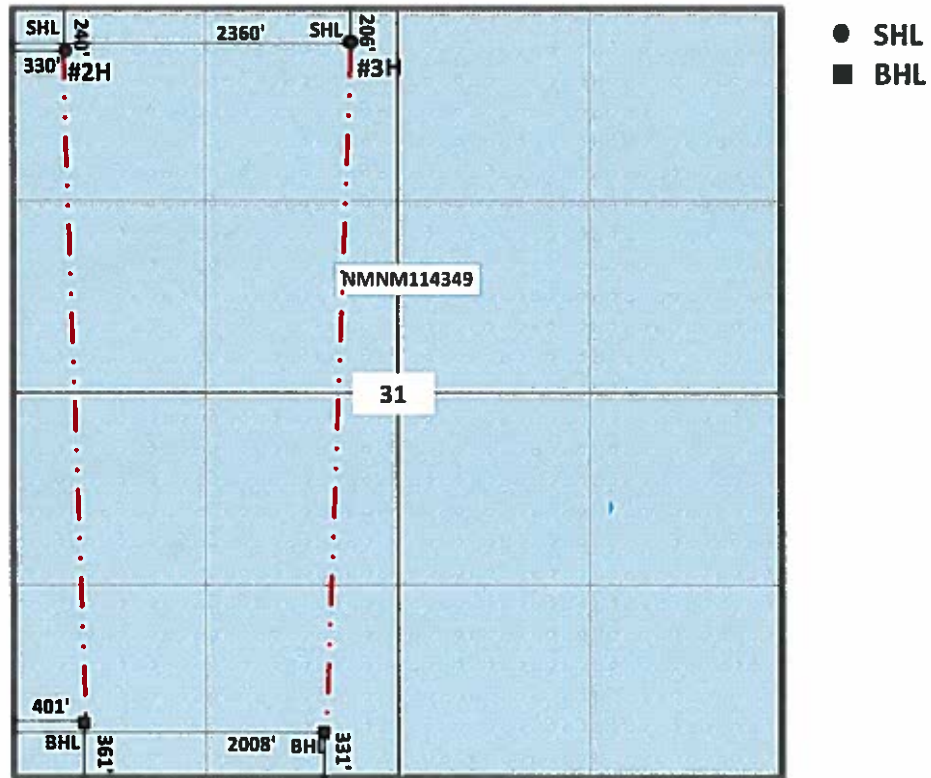
Jack Federal 2H - SHL

Lucid Gas Sales Meter #10560



1000 ft

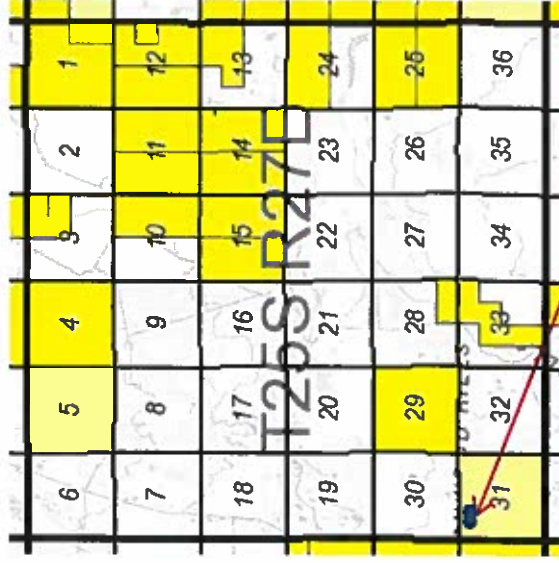
Jack Federal #2H & #3H



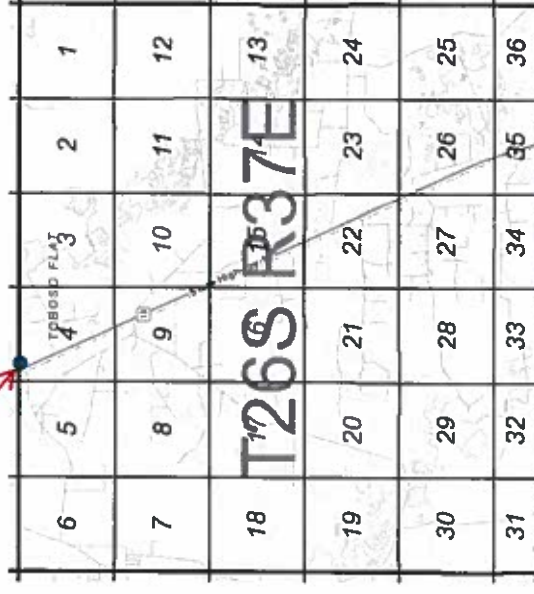
T25S-R27E

Jack Federal #2H & #3H & Red Hills and Jal Offload Station Map

Red Hills Offload Station
Lea County, NM



Jal Offload Station
Lea County, NM



Jack Federal #2H & #3H
Eddy County, NM



February 27, 2018

**NM Oil Conservation Division
Attn: Michael McMillan
1220 South Saint Francis Drive
Santa Fe, NM 87505**

**Re: Jack Federal 2H & Jack Federal 3H Ownership
Off-Leases Measurement Application
Eddy County, New Mexico**

Dear Mr. McMillan,

In reference to the recent Off-Lease Measurement application sent in earlier this month, the Jack Federal 2H and Jack Federal 3H have identical ownership. Should you have any questions, please do not hesitate to contact me at 432.818.2358 or Bobbie Goodloe at 575.748.6952.

Sincerely,

COG Operating LLC

A handwritten signature in cursive script that reads "Ashley Roush".

**Ashley Roush, RPL
Landman**

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
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.*5. Lease Serial No.
NMNM114349

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on page 28. Well Name and No.
JACK FEDERAL 2H

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator
COG OPERATING LLCContact: AMANDA AVERY
E-Mail: aavery@concho.com3a. Address
2208 W MAIN STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-694010. Field and Pool or Exploratory Area
WILDCAT; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 31 T25S R27E NWNW 240FNL 330FWL

11. County or Parish, State

EDDY COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation. Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple 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.

COG Operating LLC respectfully requests to designate Meter # 10560 as the official facility measurement point (FMP) for gas produced from this well. (Please see attached site facility diagram.) The FMP meter is located on lease NMNM114349 at the Jack Federal #2H battery. Meter meets API and AGA standards and will measure and be calibrated in compliance with all federal requirements and regulations.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #398655 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) AMANDA AVERY

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 12/20/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

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

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 United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
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.*5. Lease Serial No.
NMNM114349

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other8. Well Name and No.
JACK FEDERAL 2H2. Name of Operator
COG OPERATING LLCContact: AMANDA AVERY
E-Mail: aavery@concho.com9. API Well No.
30-015-421323a. Address
2208 W MAIN STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-694010. Field and Pool or Exploratory Area
WILDCAT; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 31 T25S R27E NWNW 240FNL 330FWL

11. County or Parish, State

EDDY COUNTY, NM

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<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple 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.

COG Operating LLC respectfully requests to designate Tank #30999337-1 as the official facility measurement point (FMP) for oil produced from this well. (Please see attached site facility diagram.) The FMP meter is located on lease # NMNM114349 at the Jack Federal #2H battery. Measurement will be in compliance with all federal requirements and regulations.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #398660 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad

Name (Printed/Typed) AMANDA AVERY

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 12/20/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By	Title	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	

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 United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Jack Federal #2H - 30-015-42132

Jack Federal #3H - 30-015-42133

Application for Off-lease Measurement - Oil-Red Hills & Jal Offload

Notification List

Round 2

Date Sent	Initials	Sent Certified Return Receipt to:	Receipt No.	Rec'd
2/28/2018	bjg	EG3	7017-3040-0000-2539-9309	
2/28/2018	bjg	Bureau of Land Management	7017-3040-0000-2539-9286	
2/28/2018	bjg	The Allar Company	7017-3040-0000-2539-9293	
2/28/2018	bjg	Nestegg Energy Corporation	7017-3040-0000-2539-9316	
2/28/2018	bjg	Allar Development LLC	7017-3040-0000-2539-9323	
2/28/2018	bjg	Crownrock Minerals LP	7017-3040-0000-2539-9330	
2/28/2018	bjg	Cornerstone Family Trust	7017-3040-0000-2539-9347	

Mailed_ 2/28/2018

Bobbie Goodloe