

Initial Application Part I

Received: 08/12/2019

This application is placed in file for record. It MAY or MAY NOT have been reviewed to be determined Administratively Complete

RECEIVED: 08/12/2019	REVIEWER: MAM	TYPE: CTB	APP NO: pMAM1922459237
----------------------	---------------	-----------	------------------------

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: Shocker 20 Fed Com 1H I & FIVE OTHER WELLS/PLEASE SEE ATTACHED **API:** 30-015-36430
Pool: Willow Lake; Bone Springs **Pool Code:** 96217

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

CTB-909

- 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	
<input type="checkbox"/>	Notice Complete
<input type="checkbox"/>	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.

Jeanette Barron
 Print or Type Name

8/12/19
 Date

575-748-6974
 Phone Number

jbarron@concho.com
 e-mail Address

Jeanette Barron
 Signature

District I
1625 N. French Drive, Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St Francis Dr. Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B
Revised August 1, 2011

OIL CONSERVATION DIVISION
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: COG Operating LLC
OPERATOR ADDRESS: 2208 W. Main Street, Artesia, NM 88210
APPLICATION TYPE:

Pool Commingling Lease Commingling Pool and Lease Commingling Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE: Fee State Federal

Is this an Amendment to existing Order? Yes No If "Yes", please include the appropriate Order No. _____
Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
 Yes No

(A) POOL COMMINGLING

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes

(2) Are any wells producing at top allowables? Yes No
(3) Has all interest owners been notified by certified mail of the proposed commingling? Yes No.
(4) Measurement type: Metering Other (Specify)
(5) Will commingling decrease the value of production? Yes No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING

Please attach sheets with the following information

(1) Pool Name and Code.
(2) Is all production from same source of supply? Yes No
(3) Has all interest owners been notified by certified mail of the proposed commingling? Yes No
(4) Measurement type: Metering Other (Specify)

(C) POOL and LEASE COMMINGLING

Please attach sheets with the following information

(1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

(1) Is all production from same source of supply? Yes No
(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location.
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.
(3) Lease Names, Lease and Well Numbers, and API Numbers.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Jeanette Barron TITLE: Regulatory Analyst DATE: 08.12.19
TYPE OR PRINT NAME Jeanette Barron TELEPHONE NO.: 575-748-6974 E-MAIL ADDRESS jbarron@concho.com



August 12, 2019

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

Re: Application for Administrative Approval of Lease Commingle and CTB

Dear Mr. McMillan,

COG Operating LLC respectfully requests approval for off-lease measurement and lease surface commingling for the following wells:

Shocker 20 Federal 1H
API# 30-015-36430
Willow Lake; Bone Springs
SHL: 1750' FSL 330' FWL, Ut. L, Sec. 20-T25S-R29E
BHL: 1750' FSL 2310' FWL, Ut. K, Sec. 20-T25S-R29E
Eddy County, NM

White Federal Com 1H
API# 30-015-36185
Willow Lake; Bone Springs
SHL: 480' FNL 380' FEL, Ut. A, Sec. 21-T25S-R29E
BHL: 333' FSL 437' FEL, Ut. P, Sec. 21-T25S-R29E
Eddy County, NM

Showstopper 19 Federal Com 3H
API# 30-015-37682
Willow Lake; Bone Springs
SHL: 430' FSL 430' FEL, Ut. P, Sec. 19-T25S-R29E
BHL: 309' FNL 420' FEL, Ut. A, Sec. 19-T25S-R29E
Eddy County, NM

Showstopper 19 Federal Com 4H
API# 30-015-37374
Willow Lake; Bone Springs
SHL: 660' FSL 2310' FEL, Ut. O, Sec. 19-T25S-R29E
BHL: 319' FNL 2204' FEL, Ut. B, Sec. 19-T25S-R29E
Eddy County, NM

Showstopper 19 Federal Com 5H
API# 30-015-37373
Willow Lake; Bone Springs
SHL: 330' FSL 2310' FWL, Ut. N, Sec. 19-T25S-R29E
BHL: 334' FNL 2153' FWL, Ut. C, Sec. 19-T25S-R29E
Eddy County, NM

Showstopper 19 Federal Com 6H
API# 30-015-37480
Willow Lake; Bone Springs
SHL: 330' FSL 775' FWL, Ut. M, Sec. 19-T25S-R29E
BHL: 350' FNL 358' FWL, Ut. D, Sec. 19-T25S-R29E
Eddy County, NM

Oil Production:

The oil production from all wells will be measured, stored, and sold on lease. In addition, the oil production from these wells may also 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. In this case the oil will remain segregated and will be measured by lact meter when offloading at said stations.

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



Gas Production:

Gas produced from Shocker 20 Federal 1H, will be measured on lease by allocation meter prior to entering the flow line. The gas produced from the White Federal Com 1H, will be measured on lease by allocation meter prior to entering the flow line. The Showstopper 19 Federal Com 3H, 4H, 5H & 6H will be measured by allocation meter on lease at the Central Tank Battery. Gas produced from all wells will be commingled and will enter a flow line to the gas custody transfer meter. The DCP custody transfer meter is located off lease in Ut. D, Sec. 21-T25S-R29E.

All owners of interest have been notified by certified mail that should they have an objection to this off-lease measurement and surface commingling, they must file a formal protest with the NMOCD within 20 days of the date of this application. Proof of owner notification is enclosed.

Please see the enclosed Administrative Application Checklist, C-107B Application for Surface Commingling, plats for referenced wells, site facility diagram, maps with lease boundaries showing wells and facility locations along with copies of the submitted FMP sundries.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink that reads "Jeanette Barron".

Jeanette Barron
Regulatory Analyst

Enclosures

xc: Artesia OCD

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

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 30-015-36430		² Pool Code 96217		³ Pool Name Willow Lake; Bone Springs	
⁴ Property Code 308799		⁵ Property Name SHOCKER 20 FEDERAL			⁶ Well Number 1H
⁷ OGRID No. 229137		⁸ Operator Name COG Operating LLC			⁹ Elevation 2973'

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
L	20	25S	29E		1750	SOUTH	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
K	20	25S	29E		1750	SOUTH	2310	WEST	EDDY

¹² Dedicated Acres 80	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>¹⁷ 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>Jeanette Barron</i> 8/12/19 Signature Date</p> <p>Jeanette Barron Printed Name</p> <p>jbarron@concho.com E-mail Address</p>		
	<p>¹⁸ 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>PLEASE SEE ORIGINAL PLAT</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor:</p>		
	<p>Certificate Number</p>		

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 30-015-37374	² Pool Code 96217	³ Pool Name Willow Lake, Bone Springs
⁴ Property Code 308266	⁵ Property Name SHOWSTOPPER 19 FEDERAL COM	
⁷ OGRID No. 229137	⁶ Operator Name COG Operating LLC	

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
O	19	25S	29E		660	South	2310	East	Eddy

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
B	19	25S	29E		319	North	2204	East	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>¹⁷ OPERATOR CERTIFICATION</p> <p><i>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.</i></p> <p style="text-align: right;"><i>Jeanette Barron</i> 8/12/19 Signature Date</p> <p>Jeanette Barron Printed Name</p> <p>jbarron@pondcho.com E-mail Address</p> <p>¹⁸ SURVEYOR CERTIFICATION</p> <p><i>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.</i></p> <p>PLEASE SEE ORIGINAL PLAT</p> <p>Date of Survey Signature and Seal of Professional Surveyor</p> <p>Certificate Number</p>
--	---

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 30-015-37373		² Pool Code 96217	³ Pool Name Willow Lake; Bone Springs
⁴ Property Code 308266	⁵ Property Name SHOWSTOPPER 19 FEDERAL COM		⁶ Well Number 5H
⁷ OGRID No. 229137	⁸ Operator Name COG Operating LLC		⁹ Elevation 2910'

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
N	19	25S	29E		330	South	2310	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
C	19	25S	29E		334	North	2153	West	Eddy

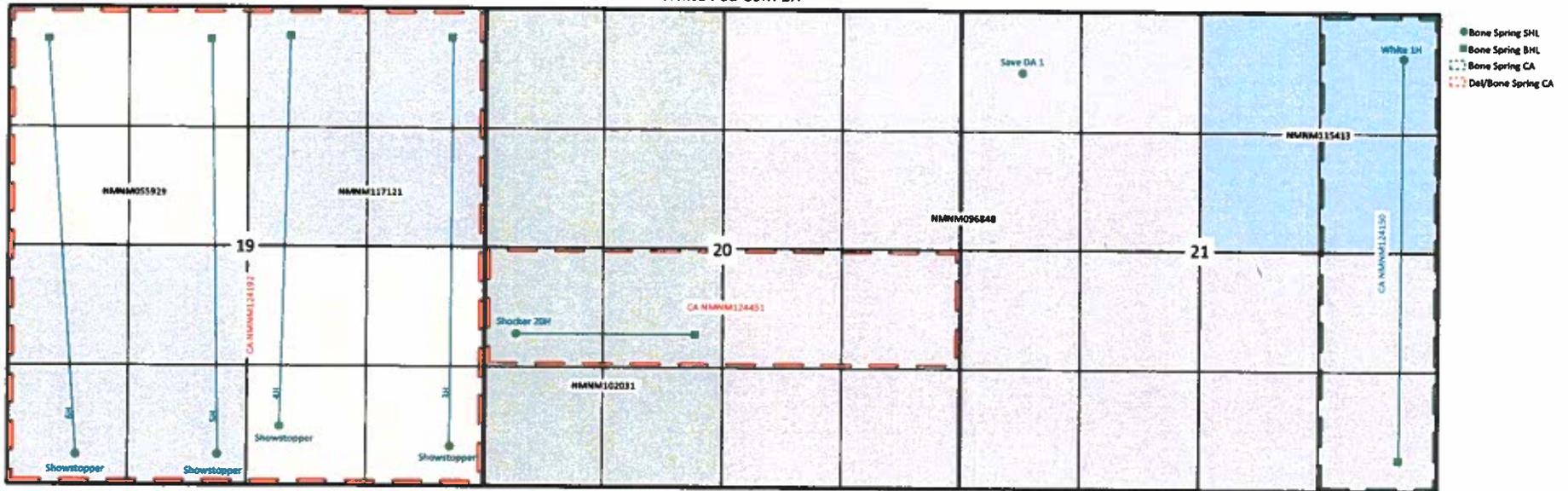
¹² Dedicated Acres 160	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--------------------------------------	-------------------------------	----------------------------------	-------------------------

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.

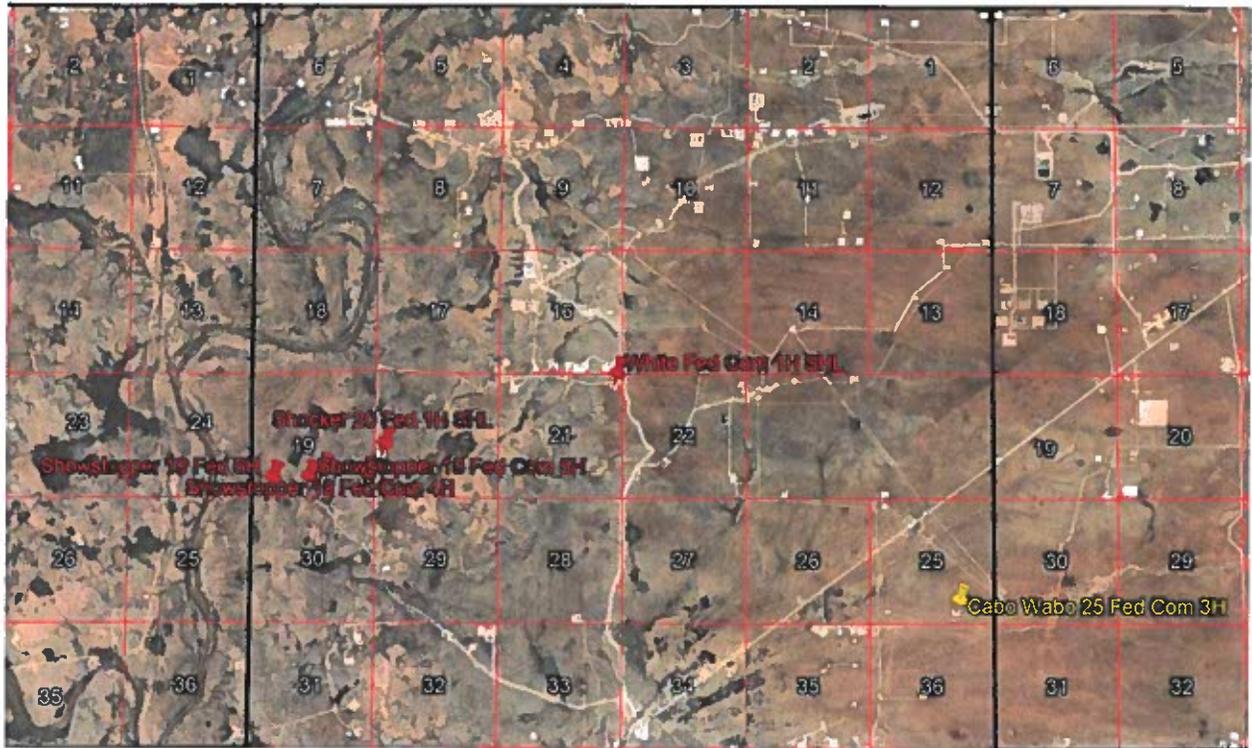
¹⁶ 2153 BHL 334' SHL 2310' 330'	¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom 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. <i>Jeanette Barron</i> 8/12/19 Signature Date Jeanette Barron Printed Name jbarron@soncho.com E-mail Address	
	¹⁸ 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. PLEASE SEE ORIGINAL PLAT Date of Survey Signature and Seal of Professional Surveyor:	
	Certificate Number	

CORRAL DRAW GATHERING SYSTEM

Save DA 21 Fed 1
Shocker 20 Fed Com 1H
Showstopper 19 Fed Com 3H, 4H, 5H, 6H
White Fed Com 1H



Sec. 19, 20, 21-T25S-R29E
Eddy County, NM



SEC 19, 20, 21-T25S-R29E

Corral Draw Gathering System

Shocker 20 Fed Com 1H

Showstopper 19 Fed Com 3H, 4H 5H & 6H

White Fed Com 1H

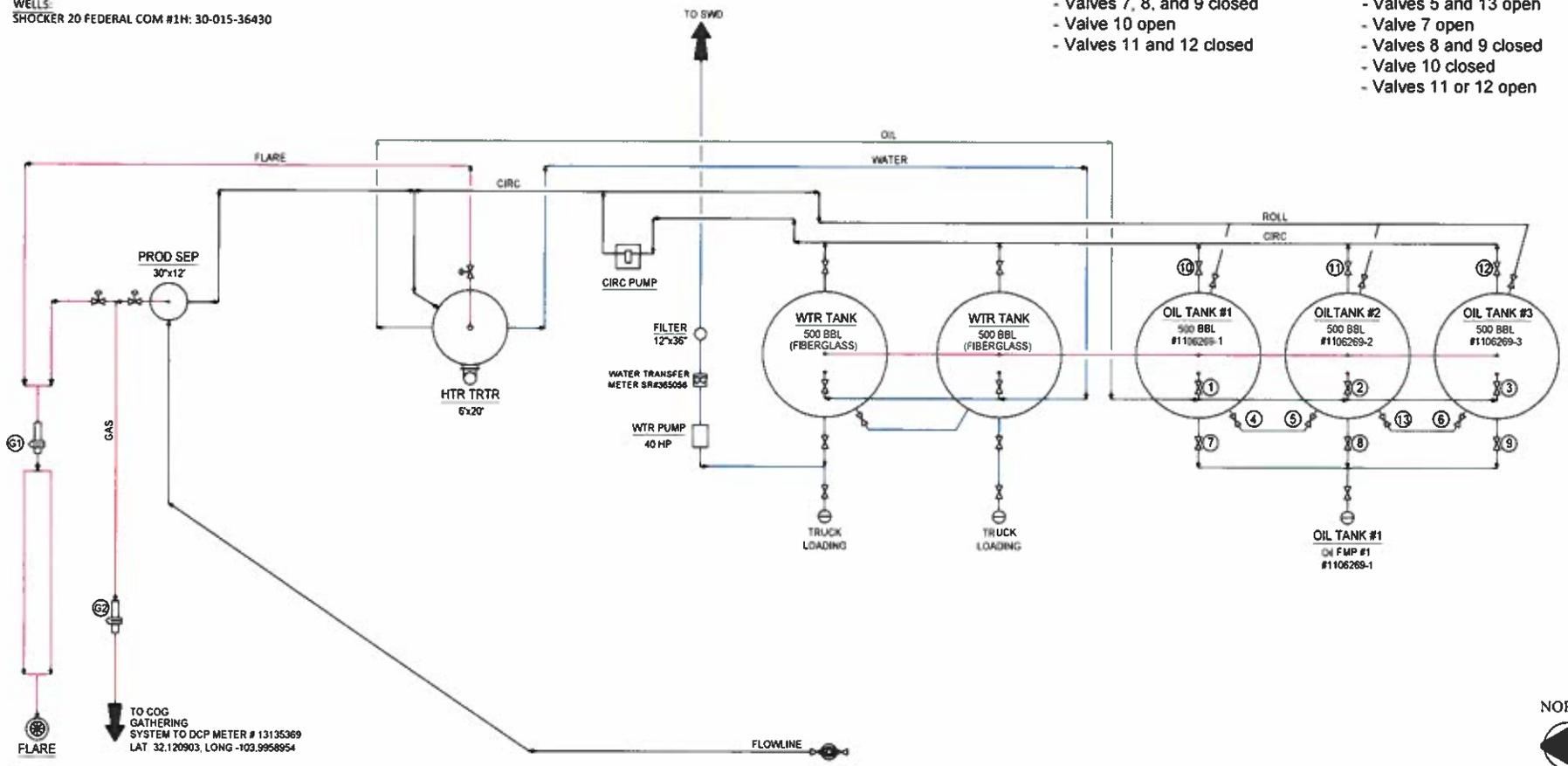
SHOCKER 20 FEDERAL COM #1H
 SEC. 20/T255/R29E
 COORDS: 32.113105, -104.013899
 EDDY COUNTY, NM

WELLS:
 SHOCKER 20 FEDERAL COM #1H: 30-015-36430

GAS METERS
 COG Flare Meter
 (G1) #88522388
 COG FMP Meter
 (G2) #88522039

Production Phase - Oil Tank #1
 - Valve 1 open
 - Valves 2 and 3 closed
 - Valves 4, 5, 6, and 13 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 13 open
 - Valve 7 open
 - Valves 8 and 9 closed
 - Valve 10 closed
 - Valves 11 or 12 open



NOTES: Type of Lease: Federal State Lease #: N/A Federal Lease #: NMMN102031 CA/Agreement #: NMMN124451 Property Code: 308799 OGRID #: 229137	Ledger for Site Diagram Produced Fluid: — Produced Oil: — Produced Gas: — Produced Water: — Flare/Vent: —	CONFIDENTIALITY NOTICE THIS DRAWING IS PROPERTY OF CONCHO OPERATING LLC AND IS LOANED TO THE BORROWER FOR CONFIDENTIAL USE ONLY AND IS SUBJECT TO RETURN UPON REQUEST AND SHALL NOT BE REPRODUCED, COPIED, LOANED OR OTHERWISE DISPOSED OF DIRECTLY OR INDIRECTLY, NOR USED FOR ANY PURPOSE OTHER THAN THAT WHICH IT IS SPECIFICALLY FURNISHED.	REFERENCE DRAWINGS		REVISIONS				ENGINEERING RECORD		 NORTHERN DELAWARE BASIN ASSET PRODUCTION FACILITIES SITE FACILITY DIAGRAM SHOCKER 20 FEDERAL COM 1H EDDY COUNTY, NEW MEXICO
			NO. DATE A 08/22/10 B 08/21/10 C 01/28/10 D 6/27/10	TITLE WTR TANK #1 WTR TANK #2 WTR TANK #3 OIL TANK #1 OIL TANK #2 OIL TANK #3	NO. DATE A 08/22/10 B 08/21/10 C 01/28/10 D 6/27/10	DESCRIPTION REVISED FOR APPROVAL REVISED FOR FIELD VERIFICATION REVISED FOR FIELD VERIFICATION REVISED FOR METER CHANGE	BY: GJW JS JS RTC	CHK: ME RTC RTC	APP:	BY: GJW DES:	

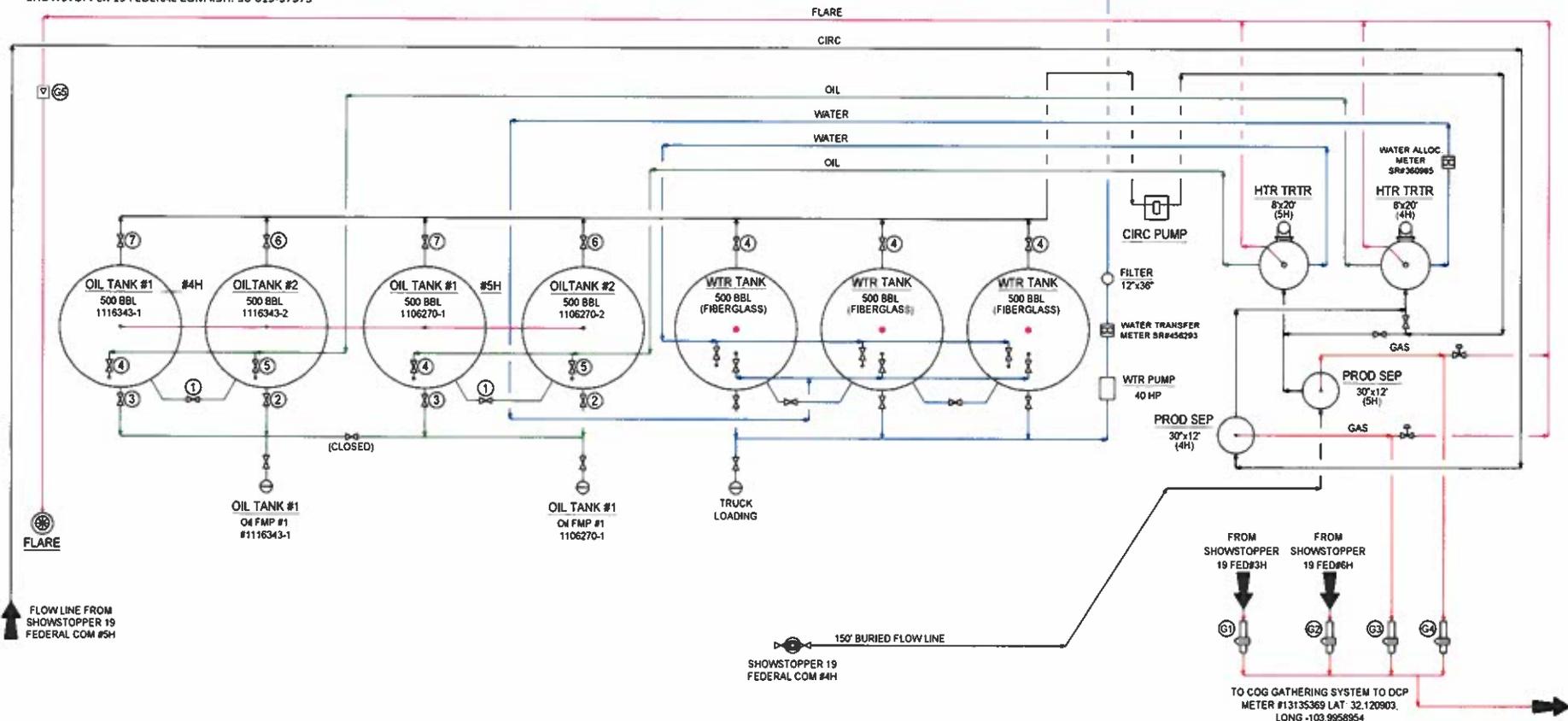
SHOWSTOPPER 19 FEDERAL COM #4H & #5H
 SEC: 19/T255/R29E
 COORDS: 32.110372, -104.02296
 EDDY COUNTY, NM

WELLS:
 SHOWSTOPPER 19 FEDERAL COM #4H: 30-015-37374
 SHOWSTOPPER 19 FEDERAL COM #5H: 30-015-37373

GAS METERS
 Gas FMP Meter (3H)
 (G1) #88522046
 Gas FMP Meter (4H)
 (G3) #88522048
 Gas FMP Meter (5H)
 (G4) #88522049
 Gas FMP Meter (6H)
 (G2) #88522047
 COG Flare Meter
 (G5) #88522395

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



NOTES:
 Type of Lease: Federal
 State Lease #: NMNM055929/NMNM117121
 Federal Lease: N/A
 CA/Agreement #: NMNM124192
 Property Code: 308266
 OGRID #: 229137

Ledger for Site Diagram
 Produced Fluid: —
 Produced Oil: —
 Produced Gas: —
 Produced Water: —
 Flare/Vent: —

CONFIDENTIALITY NOTICE
 THIS DRAWING IS PROPERTY OF COG OPERATING LLC AND IS LOANED TO THE BORROWER FOR CONFIDENTIAL USE ONLY AND IS SUBJECT TO RETURN UPON REQUEST AND SHALL NOT BE REPRODUCED, COPIED, LOANED OR OTHERWISE DISPOSED OF DIRECTLY OR INDIRECTLY, NOR USED FOR ANY PURPOSE OTHER THAN THAT WHICH IT IS SPECIALLY FURNISHED.

REFERENCE DRAWINGS		REVISIONS	
NO.	TITLE	NO.	DATE
		A	08/22/18
		B	08/21/18
		C	02/04/19
		D	8/27/19

NO.	DATE	DESCRIPTION	BY	CHK.	APP.	DATE
A	08/22/18	ISSUE FOR APPROVAL	GEW			08/21/18
B	08/21/18	REVISED PER FIELD VERIFICATION	JS	MSK		
C	02/04/19	REVISED PER FIELD VERIFICATION	JS	RTG		
D	8/27/19	REVISED PER METER CHANGES	RTG			

CONCHO
 NORTHERN DELAWARE BASIN ASSET
 PRODUCTION FACILITIES
 SHOWSTOPPER 19 FEDERAL COM 4H & 5H
 EDDY COUNTY, NEW MEXICO

DATE: 08/21/18
 DRAWN BY: GEW
 CHECKED BY: MSK
 APPR. BY: JS
 SCALE: NONE

PROJECT NO.: 0-1700-81-
 SHEET NO.: 0

COG OPERATING LLC
 ONE CONCHO CENTER
 600 WEST ILLINOIS AVENUE
 MIDLAND, TEXAS 79701

WHITE FEDERAL #1H
 SEC: 21/T255/R29E
 COORDS: 32.12119, -103.982294
 EDDY COUNTY, NM

GAS METERS
 COG Flare Meter
 (G1) #84522389
 COG FMP Meter
 (G2) #88522035

ROAD

Production Phase - Oil Tank #1

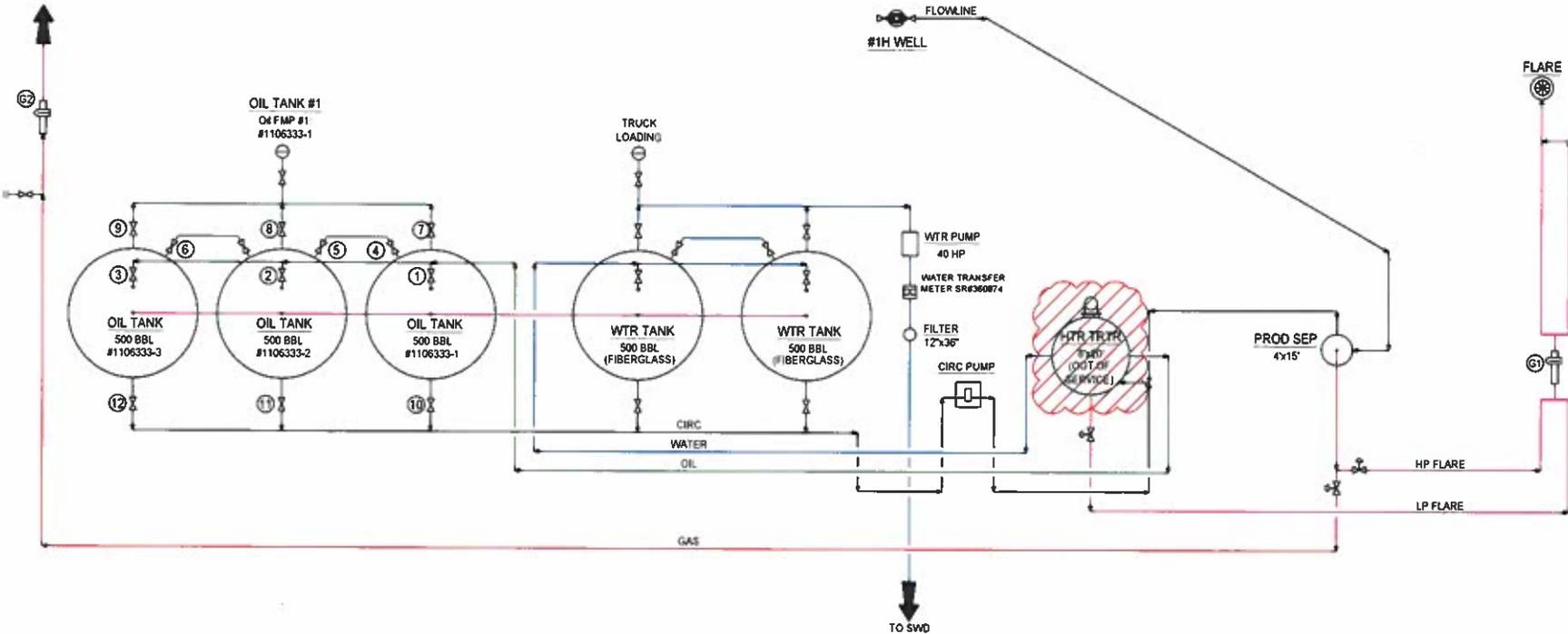
- Valve 1 open
- Valves 2 and 3 closed
- Valves 4, 5, and 6 open
- Valves 7, 8, and 9 closed
- Valve 10 open
- Valves 11 and 12 closed

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

WELLS:
 WHITE FEDERAL #1H: 30-015-36185

TO COG
 GATHERING
 SYSTEM TO DCP METER # 13135369
 LAT. 32.120803, LONG -103.996954



NOTES:
 Type of Lease: Federal
 State Lease #: N/A
 Federal Lease #: NMMN115413
 CA/Agreement #: NMMN124150
 Property Code: 308270
 OGRID #: 229137

Ledger for Site Diagram

Produced Fluid: —
 Produced Oil: —
 Produced Gas: —
 Produced Water: —
 Flare/Vent: —

CONFIDENTIALITY NOTICE
 THIS DRAWING IS PROPERTY OF COG OPERATING LLC AND IS LOANED TO THE BORROWER FOR CONFIDENTIAL USE ONLY AND IS SUBJECT TO RETURN UPON REQUEST AND SHALL NOT BE REPRODUCED, COPIED, LOANED OR OTHERWISE DISPOSED OF DIRECTLY OR INDIRECTLY, NOR USED FOR ANY PURPOSE OTHER THAN THAT WHICH IT IS SPECIFICALLY FURNISHED.

REFERENCE DRAWINGS		REVISIONS		ENGINEERING RECORD	
NO.	TITLE	NO.	DATE	BY	DATE
A		A	07/13/18	GEW	07/9/18
B		B	08/21/18	JS	
C		C	01/29/18	JS	
D		D	8/21/18	RTG	

COG OPERATING LLC
 SITE SECURITY PLANS
 LOCATED AT:
 ONE CONCHO CENTER
 800 WEST ILLINOIS AVENUE
 MIDLAND, TEXAS 79701

NO.	DATE	DESCRIPTION	BY	CHK.	APP.	DATE
A	07/13/18	ISSUE FOR APPROVAL	GEW			07/9/18
B	08/21/18	REVISED FOR FIELD VERIFICATION	JS	MK		
C	01/29/18	REVISED FOR FIELD VERIFICATION	JS	RG		
D	8/21/18	REVISED FOR METER CHANGES	RTG			

CONCHO
 NORTHERN DELAWARE BASIN ASSET
 PRODUCTION FACILITIES
 SITE FACILITY DIAGRAM
 WHITE FEDERAL 1H

EDDY COUNTY
 TOWNSHIP/RANGE
 MULTIPLE

NEW MEXICO
 DWG NO. 0-1700-81-
 REV D

Shocker 20 Fed Com 1H
Showstopper 19 Fed Com 3H, 4H, 5H & 6H
White Fed Com 1H

&

Red Hills and Jal Offload Station Map

Shocker 20 Fed Com 1H
 Showstopper 19 Fed Com
 3H, 4H, 5H & 6H
 White Fed Com 1H
 Eddy County, NM

6	5	4	3	2	1
7	8	9	10	11	12
18	17	16	15	14	13
19	20	21	22	23	24
30	29	28	27	26	25
31	32	33	34	35	36

T25S R29E

Red Hills Offload
 Station
 Lea County, NM

6	5	4	3	2	1
7	8	9	10	11	12
18	17	16	15	14	13
19	20	21	22	23	24
30	29	28	27	26	25
31	32	33	34	35	36

T26S R32E

Jal Offload Station
 Lea County, NM

6	5	4	3	2	1
7	8	9	10	11	12
18	17	16	15	14	13
19	20	21	22	23	24
30	29	28	27	26	25
31	32	33	34	35	36

T26S R37E

EDI API Well Number	Prod Date	Field #	Field Name	Lease #	Lease Name	Well #	Property	Oil Sold	Gas Prod	Days Up
3001536430	12/2018	96217	Willow Lake;Bone Spring, Southeast	308799	SHOCKER 20 FEDERAL	001	1110110	345	6236	31
3001536430	01/2019	96217	Willow Lake;Bone Spring, Southeast	308799	SHOCKER 20 FEDERAL	001	1110110	0	5792	31
3001536430	02/2019	96217	Willow Lake;Bone Spring, Southeast	308799	SHOCKER 20 FEDERAL	001	1110110	0	5436	28
3001536430	03/2019	96217	Willow Lake;Bone Spring, Southeast	308799	SHOCKER 20 FEDERAL	001	1110110	186	6403	31
3001536430	04/2019	96217	Willow Lake;Bone Spring, Southeast	308799	SHOCKER 20 FEDERAL	001	1110110	0	6633	30
3001536430	05/2019	96217	Willow Lake;Bone Spring, Southeast	308799	SHOCKER 20 FEDERAL	001	1110110	0	7494	31
3001537682	12/2018	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	003H	1109711	182	9695	31
3001537682	01/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	003H	1109711	0	11414	31
3001537682	02/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	003H	1109711	193	11264	28
3001537682	03/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	003H	1109711	185	5988	31
3001537682	04/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	003H	1109711	372	5819	30
3001537682	05/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	003H	1109711	0	5785	31
3001537374	12/2018	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	004	1109712	206	102	11
3001537374	01/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	004	1109712	0	64	31
3001537374	02/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	004	1109712	0	67	28
3001537374	03/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	004	1109712	0	5988	31
3001537374	04/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	004	1109712	0	5818	30
3001537374	05/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	004	1109712	0	5784	31
3001537373	12/2018	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	005	1109713	0	6543	31
3001537373	01/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	005	1109713	194	8531	31
3001537373	02/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	005	1109713	0	7507	28
3001537373	03/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	005	1109713	181	5988	31
3001537373	04/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	005	1109713	0	5818	30
3001537373	05/2019	96217	Willow Lake;Bone Spring, Southeast	308266	SHOWSTOPPER 19 FEDERAL COM	005	1109713	181	5784	31
3001537480	12/2018	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	006	1109714	545	5059	31
3001537480	01/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	006	1109714	363	3688	31
3001537480	02/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	006	1109714	0	5115	28
3001537480	03/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	006	1109714	373	5989	31
3001537480	04/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	006	1109714	368	5818	30
3001537480	05/2019	96217	Willow Lake;Bone Spring, Southeast	308168	SHOWSTOPPER 19 FEDERAL	006	1109714	367	5784	31
3001536185	12/2018	96217	Willow Lake;Bone Spring, Southeast	308270	WHITE FEDERAL	001	1110353	0	3576	31
3001536185	01/2019	96217	Willow Lake;Bone Spring, Southeast	308270	WHITE FEDERAL	001	1110353	0	9839	31
3001536185	02/2019	96217	Willow Lake;Bone Spring, Southeast	308270	WHITE FEDERAL	001	1110353	175	8436	28
3001536185	03/2019	96217	Willow Lake;Bone Spring, Southeast	308270	WHITE FEDERAL	001	1110353	0	9249	31
3001536185	04/2019	96217	Willow Lake;Bone Spring, Southeast	308270	WHITE FEDERAL	001	1110353	174	8447	30
3001536185	05/2019	96217	Willow Lake;Bone Spring, Southeast	308270	WHITE FEDERAL	001	1110353	0	14203	31

Shocker 20 Fed Com 1H/Showstopper 19 Fed Com 3H, 4H, 5H & 6H/White Fed Com 1H

Date Sent	Initials	Name	Address	City	State	ZipCode	Certified Return Receipt No.	Delivered
	JB	DEVON ENERGY PRODUCTION CO LP	P O BOX 843559	DALLAS	TX	75284-3559	7018 1830 0000 7074 0644	
	JB	EOG RESOURCES INC	P O BOX 840321	DALLAS	TX	75284-0321	7018 1830 0000 7074 0651	
	JB	GEORGE G VAUGHT JR	P O BOX 13557	DENVER	CO	80201-3557	7018 1830 0000 7074 0507	
	JB	OFFICE OF NATURAL RESOURCES REVENUE	P.O. Box 5760	Denver	CO	80217-5760	7018 1830 0000 7074 1047	
	JB	KINGDOM INVESTMENTS LTD	2101 CEDAR SPRINGS RDSTE 600	DALLAS	TX	75201	7018 1830 0000 7074 0521	
	JB	FEATHERSTONE DEVELOPMENT CORP.	P O BOX 429	ROSWELL	NM	88202	7018 1830 0000 7074 0699	
	JB	TAURUS ROYALTY LLC C/O ROBERT B PAYNE JR	PO BOX 1477	LITTLE ELM	TX	75068	7018 1830 0000 7074 0538	
	JB	BIG THREE ENERGY GROUP LLC	P O BOX 429	ROSWELL	NM	88202-0429	7018 1830 0000 7074 0712	
	JB	PARROT HEAD PROPERTIES LLC	P O BOX 429	ROSWELL	NM	88202-0429	7018 1830 0000 7074 0729	
	JB	PROSPECTOR LLC	P O BOX 429	ROSWELL	NM	88202-0000	7018 1830 0000 7074 0736	
	JB	PAUL R BARWIS C/O DUTTON, HARRIS & ASSOC.	PO BOX 230	MIDLAND	TX	79702	7018 1830 0000 7074 0545	
	JB	JAREED PARTNERS, LTD.	P.O. BOX 51451	MIDLAND	TX	79710-1450	7018 1830 0000 7074 0552	
	JB	RAVE ENERGY, INC.	PO BOX 3087	HOUSTON	TX	77253	7018 1830 0000 7074 0569	
	JB	NESTEGG ENERGY CORP	2308 SIERRA VISTA RD	ARTESIA	NM	88210-9409	7018 1830 0000 7074 0576	
	JB	OXY Y-1 COMPANY	P O BOX 841803	DALLAS	TX	75284	7018 1830 0000 7074 0781	
	JB	CROWNROCK MINERALS LP	P.O. BOX 51933	MIDLAND	TX	79710	7018 1830 0000 7074 0583	
	JB	RUSK CAPITAL MANAGEMENT LLC	7600 W TIDWELL ROAD, STE 800	HOUSTON	TX	77040	7018 1830 0000 7074 0590	
	JB	CHISOS MINERALS LLC	1111 BAGBY ST STE 2150	HOUSTON	TX	77002	7018 1830 0000 7074 0606	
	JB	CORNERSTONE FAMILY TRUST JOHN KYLE THOMA, TRUSTEE	PO BOX 558	PEYTON	CO	80831-0558	7018 1830 0000 7074 0613	
	JB	DUNCAN MANAGEMENT LLC AGENT FBO KIMBELL ROYALTY HOLDINGS LLC	PO BOX 671099	DALLAS	TX	75367-1099	7018 1830 0000 7074 0620	
	JB	Chevron U.S.A., Inc.	P O BOX 730436	Dallas	TX	75373-0436	7017 3040 0000 1222 3358	
	JB	LYNN S CHARUK	3921 TANFORAN AVENUE	MIDLAND	TX	79707-1427	7017 3040 0000 1222 3365	
	JB	MITCHEL E CHENEY	7670 WOODWAY, SUITE 175	HOUSTON	TX	77063	7017 3040 0000 1222 3372	
	JB	EXXON MOBIL CORPORATION C/O XTO ENERGY INC.	PO BOX 731917	DALLAS	TX	75373-1917	7017 3040 0000 1222 3396	
	JB	FORTIS MINERALS II, LLC	1111 BAGBY STREET, SUITE 2150	HOUSTON	TX	77002	7017 3040 0000 1222 3402	
	JB	WILLIAM R GOLDEN	PO BOX 97	ROSWELL	NM	88202-0000	7017 3040 0000 1222 3419	
	JB	SALT FORK LIMITED	PO BOX 911	BRECKENRIDG	TX	76424-0911	7017 3040 0000 1222 3426	

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL 3H

2. Name of Operator
COG OPERATING LLC

Contact: JEANETTE BARRON
E-Mail: JBARRON@CONCHO.COM

9. API Well No.
30-015-37682

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF GAS FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL 3H. THE GAS FACILITY MEASUREMENT POINT # 88522046 MEETS API AND AGA STANDARDS AND WILL MEASURE AND BE CALIBRATED ACCORDING TO ALL FEDERAL REQUIREMENTS AND REGULATIONS. PLEASE SEE ATTACHED SITE FACILITY DIAGRAM

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

**Electronic Submission #476830 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/06/2019

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 MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL COM 3H

2. Name of Operator
COG OPERATING LLC
Contact: JEANETTE BARRON
E-Mail: JBARRON@CONCHO.COM

9. API Well No.
30-015-37682

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF OIL FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL 3H. OIL FACILITY MEASUREMENT POINTS WILL BE TANK 1116341-1 AND TANK #2 1116341-2 AT THE BATTERY. SEE ATTACHED SITE FACILITY DIAGRAM

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

**Electronic Submission #476825 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/06/2019

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 MANAGEMENT

FORM 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.
NMNM117121

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM124192

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. SHOWSTOPPER 19 FEDERAL 4H
2. Name of Operator COG OPERATING LLC		9. API Well No. 30-015-37374
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		10. Field and Pool or Exploratory Area WILLOW LAKE;BONE SPRINGS
3b. Phone No. (include area code) Ph: 575-748-6974		11. County or Parish, State EDDY COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF GAS FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL COM 4H. THE GAS SALES METER # 88522048 MEETS API AND AGA STANDARDS AND WILL MEASURE AND BE CALIBRATED ACCORDING TO ALL FEDERAL REQUIREMENTS AND REGULATIONS. PLEASE SEE ATTACHED SITE FACILITY DIAGRAM

14. I hereby certify that the foregoing is true and correct. Electronic Submission #476817 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad	
Name (Printed/Typed) JEANETTE BARRON	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 08/06/2019

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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL COM 4H

2. Name of Operator Contact: JEANETTE BARRON
COG OPERATING LLC E-Mail: JBARRON@CONCHO.COM

9. API Well No.
30-015-37374

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF OIL FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL COM 4H. OIL FACILITY MEASUREMENT POINTS WILL BE TANK 1116343-1 AND TANK #2 1116343-2 AT THE BATTERY. SEE ATTACHED SITE FACILITY DIAGRAM

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

**Electronic Submission #476847 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/06/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

<u>Approved By</u> _____	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 MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL COM 5H

2. Name of Operator **COG OPERATING LLC** Contact: **JEANETTE BARRON**
E-Mail: **JBARRON@CONCHO.COM**

9. API Well No.
30-015-37373

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF GAS FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL COM 5H. THE GAS FACILITY MEASUREMENT POINT # 88522049 MEETS API AND AGA STANDARDS AND WILL MEASURE AND BE CALIBRATED ACCORDING TO ALL FEDERAL REQUIREMENTS AND REGULATIONS. PLEASE SEE ATTACHED SITE DIAGRAM

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

**Electronic Submission #476852 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) **JEANETTE BARRON**

Title **REGULATORY ANALYST**

Signature (Electronic Submission)

Date **08/06/2019**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

<u>Approved By</u> _____	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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL COM 5H

2. Name of Operator
COG OPERATING LLC
Contact: JEANETTE BARRON
E-Mail: JBARRON@CONCHO.COM

9. API Well No.
30-015-37373

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF OIL FACILITY MEASUREMENT POINTS FOR OUR SHOWSTOPPER 19 FEDERAL COM 5H. OIL FACILITY MEASUREMENT POINTS WILL BE TANK 1106270-1 AND TANK #2 1106270-2 AT THE BATTERY. SEE ATTACHED SITE FACILITY DIAGRAM

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

**Electronic Submission #476850 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/06/2019

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 MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL COM 6H

2. Name of Operator
COG OPERATING LLC
Contact: JEANETTE BARRON
E-Mail: JBARRON@CONCHO.COM

9. API Well No.
30-015-37480

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF GAS FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL 6H CTB. THE GAS FACILITY MEASUREMENT POINT # 88522047 MEETS API AND AGA STANDARDS AND WILL MEASURE AND BE CALIBRATED ACCORDING TO ALL FEDERAL REQUIREMENTS AND REGULATIONS. PLEASE SEE ATTACHED SITE FACILITY DIAGRAM

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

**Electronic Submission #476840 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/06/2019

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 MANAGEMENT

FORM 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.
NMNM117121

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.
NMNM124192

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
SHOWSTOPPER 19 FEDERAL COM 6H

2. Name of Operator
COG OPERATING LLC
Contact: JEANETTE BARRON
E-Mail: JBARRON@CONCHO.COM

9. API Well No.
30-015-37480

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6974

10. Field and Pool or Exploratory Area
WILLOW LAKE;BONE SPRINGS

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

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF OIL FACILITY MEASUREMENT POINTS FOR SHOWSTOPPER 19 FEDERAL COM 6H CTB. OIL FACILITY MEASUREMENT POINTS WILL BE TANK 1116342-1 AND TANK #2 1116342-2 AT THE BATTERY. SEE ATTACHED SITE FACILITY DIAGRAM

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

**Electronic Submission #476860 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad**

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/06/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

<u>Approved By</u> _____	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 MANAGEMENT

FORM 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.
NMNM115413

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. WHITE FED COM 1H
2. Name of Operator COG OPERATING LLC		9. API Well No. 30-015-36185
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		10. Field and Pool or Exploratory Area WILLOW LAKE;BONE SPRINGS
3b. Phone No. (include area code) Ph: 575-748-6974		11. County or Parish, State EDDY COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF GAS FACILITY MEASUREMENT POINTS FOR WHITE FEDERAL 1H. THE GAS FACILITY MEASUREMENT POINT #88522035 MEETS API AND AGA STANDARDS AND WILL MEASURE AND BE CALIBRATED ACCORDING TO ALL FEDERAL REQUIREMENTS AND REGULATIONS. PLEASE SEE ATTACHED SITE FACILITY DIAMGRAM

14. I hereby certify that the foregoing is true and correct. Electronic Submission #476855 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad	
Name (Printed/Typed) JEANETTE BARRON	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 08/06/2019

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 MANAGEMENT

FORM 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.
NMNM115413

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. WHITE FEDERAL COM 1H
2. Name of Operator COG OPERATING LLC		9. API Well No. 30-015-36185
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		10. Field and Pool or Exploratory Area WILLOW LAKE;BONE SPRINGS
3b. Phone No. (include area code) Ph: 575-748-6974		11. County or Parish, State EDDY COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		

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 Production Facility Changes
	<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 recomplete 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 DESIGNATION OF OIL FACILITY MEASUREMENT POINTS FOR WHITE FEDERAL 1H.
OIL FACILITY MEASUREMENT POINTS WILL BE TANK 1106333-1 AND TANK #2 1106333-2 AT THE BATTERY. SEE ATTACHED SITE FACILITY DIAGRAM

14. I hereby certify that the foregoing is true and correct. Electronic Submission #476863 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad	
Name (Printed/Typed) JEANETTE BARRON	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 08/06/2019

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 ****