## OCD-ARTESIA

Form 3160- 5 (August, 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No 1004-0137

res July 31 2010

ВС	REAU OF LAND MAN	AGEMENT			Expires July 31, 2010	
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		
				<u> </u>	1115417, BHL: NM53231 tee, or Tribe Name	
				o ir indian, Anot	tee, or Thoe Name	
	ICATE - Other Instruction	ns on page 2.		7 If Unit or CA	Agreement Name and/or No	
Type of Well  Y Oil Well  Gas Well  Other				8 Well Name and	d No	
2. Name of Operator			Big Papi Federal Com #1H			
COG Operating LLC				9 API Well No		
3a Address 2208 W. Main Street	3b Phone No (includ	Phone No (include area code)		30-015-37832		
Artesia, NM 88210		575-74	18-6946	10 Field and Pool, or Exploratory Area		
4 Location of Well (Footage, Sec, T, R, M, or Survey Description)					orral Canyon; Bone Spring, South	
SHL: 330' FNL & 1980' FEL, Unit F		Long.	11 County or Parish, State			
BHL: 334' FSL & 1826' FEL, Unit C		29E ·		Eddy	, NM	
12 CHECK APPROPRIATE BOX(S) TO	INDICATE NATURE OF		**	ATA	· - · ···	
TYPE OF SUBMISSION		TY	PE OF ACTION			
Notice of Intent	Acidize	Deepen	Production ( St	art/ Resume)	Water Shut-off	
	Altering Casing	Fracture Treat	Reclamation		Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	
	Change Plans	Plug and abandon	Temporarily A	bandon	Completion Operations	
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposa	l		
11/16/10 Rig released. 5/9/11 to 5/11/11 MIRU WSU. T 5/12/11 to 6/30/11 Perforate Bon	-	_			sand &	
3044711 gal fluid.	frae pluce					
7/5/11 MIRU CTU & drill out all 7/6/11 Began flowing back & testi		LAC(	ACCEPTED FOR RECORD			
5 5		11/15	1100	/LI I L. D .		
	RECE	IVED				
	AUG 4	<b>4</b> 2011		JUL 2	2 3 2011	
Assessed for record - NMC			ļ	1 1 h	2.00	
000 8 7-11	NMOCD A	ARTESIA	Z.	LIREALL OF LAS	ND MANAGEMENT	
	in the second		/		FIELD OFFICE	
14 I hereby certify that the foregoing is true and correct Name (Printed/ Typed)	ct.	1		/		
Stormi Davis			ulatory Analyst			
Signature.	D-4-	D.4.				
- Storm Da	دننگ THIS SPACE FOR FI	//13		`F		
	11110 0171021 01111	T	X, 2 011102 00	<u></u>		
Approved by Conditions of approval, if any are attached Appr	oval of this notice does not w	Title arrant or	<u> </u>	Da	łe	
certify that the applicant holds legal or equitable which would entitle the applicant						
Title 18 U.S.C Section 1001 AND Title 43 U.States any false, fictitiousor fraudulent statements or re	SC Section 1212, make it a	crime for any person	n knowingly and willf	ully to make any	department or agency of the United	
(Instructions on page 2)	resemations as to any matter with	n na jurisuiction				