

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO 1004-0135
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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

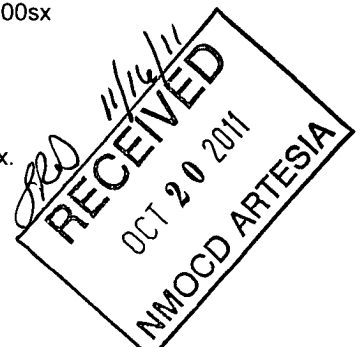
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No NMNM97874
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact CHASITY JACKSON E-Mail: cjackson@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 550 WEST TEXAS AVENUE SUITE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-686-3087	8. Well Name and No HIGH LONESOME 26 FED COM 2H
4. Location of Well (Footage, Sec, T, R, M, or Survey Description) Sec 26 T16S R29E SENE 2030FNL 530FEL 32.894390 N Lat, 104.038590 W Lon		9. API Well No 30-015-35894-00-X1
		10. Field and Pool, or Exploratory UNDESIGNATED
		11. County or Parish, and State EDDY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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	Drilling Operations
	<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 recompleat 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

9/3/11 Spud 17-1/2 @ 11:30AM. TD 17-1/2 @ 402. Ran 10jts 13-3/8 H40 48# @ 402. 9/4/11 Cmt w/300sx H. thickset, 450sx C. 300sx C. PD @ 10AM. Did not circ. Approval to top off cmt per BLM Mr. Paul Swartz. Tag TOC @ 28, Top off w/42sx. Circ 21sx. WOC 18hrs. Tested BOP to 3000# for 30 min,ok.
9/9/11 TD 12-1/4 @ 2735. Ran 68jts 9-5/8 J55 40# @ 2735. Cmt w/950sx C lead, 200sx C tail.
9/10/11 PD @ 1:23AM. Circ 200sx. WOC 18hrs. Test BOP to 3000# for 30min,ok.
9/17/11 TD 8-3/4 @ 6627.
9/19/11 Ran 146jts 7 P110 26# @ 6627. Cmt w/800sx C lead, 200sx C tail. PD @ 9:40PM. Circ 163sx. WOC 18hrs. Test BOP to 3000# for 30 min, ok.
9/22/11 6-1/8 curve from 6808 to 7685.
10/5/11 TD 6-1/8 @ 11,561'MD, 7,335'TVD.
10/8/11 Ran 104jts 4-1/2 Liner 11.6# P110 @ 11,385'MD, TOL @ 6,475.
10/9/11 RR.



14. I hereby certify that the foregoing is true and correct Electronic Submission #119959 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 10/14/2011 (12DLM0069SE)	
Name (Printed/Typed) CHASITY JACKSON	Title PREPARER
Signature (Electronic Submission)	Date 10/12/2011

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By ACCEPTED	JAMES A AMOS Title SUPERVISOR EPS	Date 10/15/2011
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 Carlsbad

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

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****