	UNITED STATES DEPARTMENT OF THE INTERIOR					FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010		
BUREAU OF LAND MANAGEMENT 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.					5. Lease Serial No. NMLC028731B			
					6. If Indian, Allottee or Tribe Name			
					7. If Unit or CA/Agreement, Name and/or No.			
I. Type of Well 🔲 Gas Well 🔲 Other					8. Well Name and No. DODD FEDERAL UNIT 035			
2. Name of Operator Contact: DAVID A EYLEF COG OPERATING LLC E-Mail: DEYLER@MILAGRO-RES.C					9. API Well No. 30-015-25231			
3a. Address 600 W. ILLINOIS AVE. MIDLAND, TX 79701	3b. Phone N Ph: 432-6	o. (include area code 87-3033	e)	10. Field and Pool, or Exploratory GRAYBURG-JACKSON;SR-Q-G-S				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, and State			
Sec 14 T17S R29E SWNE 1425FNL 1345FEL					EDDY COUNTY, NM			
12. CHECK APP	ROPRIATE BOX(ES) T	O INDICATI	E NATURE OF	NOTICE, RE	PORT, OR OTH	IER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION							
Notice of Intent	D Acidize	tize 🗖 Deepe		Production	tion (Start/Resume) 🔲 Water Shut-Off			
□ Alter Casing		□ Fracture Treat □		🗖 Reclama	<b>u</b> <i>v</i> ,		ntegrity	
🛛 Subsequent Report	Casing Repair	—	w Construction		Recomplete Other			
Final Abandonment Notice	<ul> <li>Change Plans</li> <li>Convert to Injection</li> </ul>		🔀 Plug and Abandon 🗖 Plug Back		mporarily Abandon atér Disposal			
CIBP @ 2,450'; PUMP 25 SX 03/28/13: TAG CMT.PLUG @ 1,358'; WOC X TAG CMT.PL CMT. @ 490'-3'; DIG OUT X CSGS. X INSTALL DRY HOL WELL PLUGGED AND ABAN	2 2,198'(OK'D BY BLM); F UG @ 1,106'(OK'D BY BI CUT OFF WELLHEAD 3' .E MARKER.	PUMP 25 SX: LM); MIX X C	S.CMT. W/ 2% C IRC. TO SURF. D ON STEEL PI	CACL @ 60 SXS. LATE TO	AP	CEIVE PR 16 201.	3	
RECLAMATION			Accepted as to plugging of the OPD ARTESIA					
DUE <u>9-24-13</u>			Surface restoration is completed. CRO Surface restoration is completed.					
14. I hereby certify that the foregoing i	s true and correct. Electronic Submission #	203767 verifie	d by the BI M W	ell Information	NPA	OCD		
Name(Printed/Typed) DAVID A	C, sent to the C by KURT SIMMO Title AGEN	Carlsbad ONS on 04/08/2	-					
Signature (Electronic Submission)			Date 04/08/2	<u>.</u>	· · · · · · · · · · · · · · · · · · ·			
	THIS SPACE FO	OR FEDER			E			
cepted for Record	Lames a. Um	nos	Title SEI	05	· · · · · · · · · · · · · · · · · · ·	<b>U</b> ate	-11-1	
onditions of approval, if any, are attached rtify that the applicant holds legal or eq hich would entitle the applicant to cond	uitable title to those rights in the		Office CF					
itle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a statements or representations as	crime for any p s to any matter w	erson knowingly and vithin its jurisdiction	d willfully to mak	te to any department	or agency of the	• United	
** OPERA	TOR-SUBMITTED ** O	PERATOR	SUBMITTED	** OPERATO	DR-SUBMITTE	D **		
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						The		