	rm 3160-5 ugust 2007) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WI			FORM APPROVED. OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No. NMNM057239 6. If Indian, Allottee or Tribe Name	
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.					
abandoned w	ell. Use form 3160-3 (APD)	tor such proposals.	•		
SUBMIT IN TR	RIPLICATE - Other instruction	ons on reverse side.		7. If Unit or CA/Agr	eement, Name and/or No.
1. Type of Well	· · · · · · · · · · · · · · · · · · ·		8. Well Name and No. LIZARD POT FEDERAL 4H		
2. Name of Operator Contact: STORMI DAVIS COG OPERATING LLC E-Mail: sdavis@concho.com				9. API Well No. 30-015-38236-00-S1	
3a. Address ONE CONCHO CENTER 60 MIDLAND; TX 79701	00 W ILLINOIS AVENUE	3b. Phone No. (include area coc Ph: 575-748-6946	ie)	10. Field and Pool, or Exploratory WILLIAMS SINK	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. County or Parish, and State		
Sec 36 T19S R31E SESE 16		EDDÝ COUNTY, NM			
12. CHECK APP	PROPRIATE BOX(ES) TO I	NDICATE NATURE OF	NOTICE, RI	EPORT, OR OTHE	R DATA
TYPE OF SUBMISSION		TYPE (	TYPE OF ACTION •		
□ Notice of Intent		Deepen /	Product	ion (Start/Resume)	□ Water Shut-Off
	Alter Casing	Fracture Treat	Reclamation		Well Integrity
🛛 Subsequent Report	Casing Repair	New Construction	Recomplete		☑ Other Venting and/or Flari
Final Abandonment Notice	Change Plans	□ Plug and Abandon		arily Abandon	ng
3. Describe Proposed or Completed Op	Convert to Injection	Plug Back	U Water D	-	·
following completion of the involve testing has been completed. Final A determined that the site is ready for This well flared periodically as January 2013: 5476 MCF February 2013: 3515 MCF March 2013: 2940 MCF	bandonment Notices shall be filed of final inspection.)	only after all requirements, inclu	completion in a r iding reclamation	n, have been completed,	and the operator has
April 2013: 50 MCF				ARTES	TA DISTRICT
May 2013: 2039 MCF	ACCO	) 2/16/15 pted for record NMOCD		JAN	2 0 2015 EIVED
4. I hereby certify that the foregoing is	s true and correct. Electronic Submission #239	843 varified by the RI M W		System	
Co	For COG OPEI mmitted to AFMSS for process	RATING LLC. sent to the C	arlsbad		
Name (Printed/Typed) STORMI				DTEN FOR R	FCORD
	Submission)	Date 03/25/2	HUUL		ŽQ,
Signature (Electronic S			OFFICE	E.VAN 12/201	5 1 6
Signature (Electronic )	THIS SPACE FOR	FEDERAL OR STATE	OF NOL DS	-ynn if E	I A A
pproved By	·	Title		AMANA MANA	GEM Mate
	d. Approval of this notice does not uitable title to those rights in the sub	Title		T. Th	GEMENDAte FICE

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