

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNM CONSERVATION
ARTESIA DISTRICTFORM 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.*

FEB 23 2015

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM7752
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 ONE CONCHO CENTER 600 W. ILLINOIS AVE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-686-3087	8. Well Name and No. SAM ADAMS 12 FEDERAL COM UBB 4H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 12 T17S R29E Mer NMP SWNW 2310FNL 230FWL		9. API Well No. 30-015-41618
		10. Field and Pool, or Exploratory EMPIRE
		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	Well Spud
	<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 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.)

9/18/14 Spud 17-1/2 @ 2:45AM. TD 17-1/2 @ 271. Ran 6jts 13-3/8 J55 54.5# @ 271. Cmt w/400sx C. PD @ 9:25AM. Circ 147sx. WOC 18hrs. Test BOP to 2000# for 30 min,ok.
9/19/14 TD 12-1/4 @ 1080. Ran 25jts 9-5/8 J55 40# @ 1080. Cmt w/250sx C. lead, 250sx C. tail. PD @ 9:30PM. Circ 158sx. WOC 18hrs. Test BOP to 2000# for 30 min, ok. Drill 8-3/4 hole.
9/22/14 TD 8-3/4 vertical section, build curve KOP @ 4279.
9/24/14 TD curve @ 5236. Drill 7-7/8 lateral 5236-9314.
9/29/14 TD 7-7/8 @ 9314MD 4836TVD.
9/30/14 Ran 100jts 7" 29# L80 XO @ 4271, 111jts 5-1/2 17# L80 @ 9288. Cmt w/500sx C. lead, 1100sx C. tail. PD @ 2:26PM. Circ 298sx. WOC 24hrs. RR.

Accepted for record

RD 3/24/15

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

Electronic Submission #270801 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH HAM on 01/30/2015

Name (Printed/Typed) CHASITY JACKSON

Title PREPARER

Signature (Electronic Submission)

Date 10/14/2014

ACCEPTED FOR RECORD

FEB 12 2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Approved By

Title

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.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **