

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
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.

5. Lease Serial No.
NMNM114965

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

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		8. Well Name and No. HORNED OWL FEDERAL 2H
2. Name of Operator COG OPERATING LLC		9. API Well No. 30-015-42485-00-X1
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701		10. Field and Pool, or Exploratory WILDCAT
3b. Phone No. (include area code) Ph: 575-748-6946		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T26S R26E NENW 0190FNL 1870FWL 32.019871 N Lat, 104.248347 W Lon		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 checked="" 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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.)

7/13/15 to 10/28/15 MIRU. Test backside to 1500#. Good test. Discovered leak @ csg collar @ 4294' while prepping for frac. Set CBP @ 4425'. Dumped 20' cmt on top. RIH to 4220' & set retainer. Perform WellLock sqz w/20 bbls WellLock resin. WOC. Drill out retainer & WellLock & circ clean. Attempted to test csg. Clean out to 11900'. Set CIBP @ 11875'. Circ pkr fluid. Set pkr @ 4319' & test csg to 7000# for 15 mins. Good test. Set csg patch 4283-4303'. Test to 8500# for 15 mins. Good test.

2/3/16 to 2/20/16 Test annulus to 1500#. Good test. Perforate Bone Spring 7544-11850' (504). Acdz w/42690 gal 7 1/2% frac w/6301282# sand & 5131326 gal fluid. SI for Horned Owl Federal #4H frac.

NM OIL CONSERVATION
ARTESIA DISTRICT

APR 26 2016

RECEIVED

3/8/16 to 3/9/16 Drilled out frac plugs. Cleaned down to CIBP @ 11875'.
3/11/16 Set 2 7/8" 6.5# J-55 tbg @ 7520' & pkr @ 4195'. Installed gas-lift system.

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

Electronic Submission #335191 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 04/18/2016 (16 JAST445SE)

Name (Printed/Typed) STORMI DAVIS	Title PREPARER
Signature (Electronic Submission)	Date 03/31/2016

ACCEPTED FOR RECORD

APR 18 2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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 _____

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.

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

Additional data for EC transaction #335191 that would not fit on the form

32. Additional remarks, continued

3/12/16 Began flowing back & testing.

3/15/16 Date of first production.
