

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Carlsbad Field Office
OCG Artesia

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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. NMNM113937
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. CRAIG FEDERAL COM 12H
9. API Well No. 30-015-44208-00-X1
10. Field and Pool or Exploratory Area WC G 03 S262631M
11. County or Parish, State EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator COG OPERATING LLC Contact: MAYTE X REYES E-Mail: mreyes1@concho.com	
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 575-748-6945
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T26S R26E NWNW 675FNL 790FWL 32.077152 N Lat, 104.252678 W Lon	

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing <input type="checkbox"/> Hydraulic Fracturing <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 <input type="checkbox"/> Change to Original APD
	<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 recomple 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

COG Operating LLC, respectfully requests approval to change the flex hose variance to the original approved APD.

Flex hose variance attached.

NM OIL CONSERVATION

ARTESIA DISTRICT

JUL 24 2017

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14. I hereby certify that the foregoing is true and correct. Electronic Submission #381055 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 07/16/2017 (17PP0667SE)	
Name (Printed/Typed) MAYTE X REYES	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 07/12/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>MUSTAFA HAQUE</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>07/18/2017</u>
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 <u>Carlsbad</u>

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.

(Instructions on page 2)

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

Revisions to Operator-Submitted EC Data for Sundry Notice #381055

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	APDCH NOI	APDCH NOI
Lease:	NMNM113937	NMNM113937
Agreement:		
Operator:	COG OPERATING LLC 2208 WEST MAIN STREET ARTESIA, NM 88210 Ph: 575-748-6940	COG OPERATING LLC 600 W ILLINOIS AVENUE MIDLAND, TX 79701 Ph: 432.685.4385
Admin Contact:	MAYTE X REYES REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945	MAYTE X REYES REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945
Tech Contact:	MAYTE X REYES REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945	MAYTE X REYES REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945
Location:		
State:	NM	NM
County:	EDDY	EDDY
Field/Pool:	WC-015 G-03 S252636M; BS	WC G 03 S262631M
Well/Facility:	CRAIG FEDERAL COM 12H Sec 1 T26S R26E NWNW 675FNL 790FWL	CRAIG FEDERAL COM 12H Sec 1 T26S R26E NWNW 675FNL 790FWL 32.077152 N Lat, 104.252678 W Lon

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**PECOS DISTRICT
DRILLING OPERATIONS
CONDITIONS OF APPROVAL**

OPERATOR'S NAME:	COG Operating LLC
LEASE NO.:	NMNM113937
WELL NAME & NO.:	12H – Craig Federal Com
SURFACE HOLE FOOTAGE:	675'/N & 790'/W
BOTTOM HOLE FOOTAGE	200'/N & 330'/W, 25
LOCATION:	Section 01 T.26 S., R.26 E., NMPM
COUNTY:	Eddy County, New Mexico

All previous COAs still apply, except for the following:

1. Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. These documents shall be posted in the company man's trailer and on the rig floor.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).

MHH 07182017



GATES E & S NORTH AMERICA, INC.
134 44TH STREET
CORPUS CHRISTI, TEXAS 78405

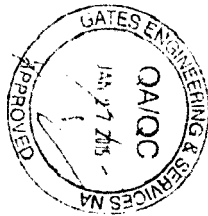
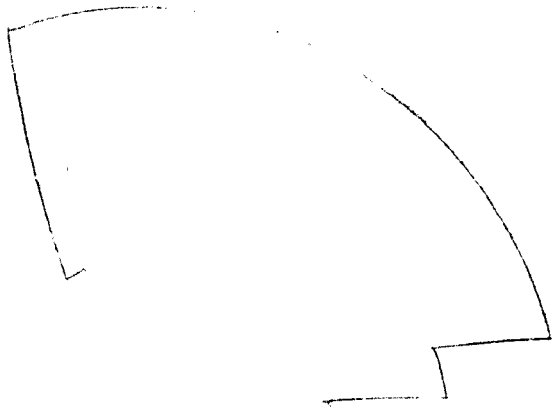
PHONE: 361-887-9807
FAX: 361-887-0812
EMAIL: Tim.Cantu@gates.com
WEB: www.gates.com

GRADE D PRESSURE TEST CERTIFICATE

Customer :	SPECIALTY SALES, INC.	Test Date:	1/26/2015
Customer Ref. :	11864-0	Hose Serial No.:	D-012615-20
Invoice No. :	206978	Created By:	ARCHIE WILLIAMS
Product Description:	D3.567.0R4.01002FXM		
End Fitting 1 :	4 in. 1002 FEMALE	End Fitting 2 :	4 in. 1002 MALE
Gates Part No. :	4774-6001	Assembly Code :	L36648121514D-012615-20
Working Pressure :	5,000- PSI	Test Pressure :	10,000 PSI

Gates E & S North America, Inc. certifies that the following hose assembly has been tested to the Gates Oilfield Roughneck Agreement/Specification requirements and passed the 15 minute hydrostatic test per API Spec 7K/Q1, Fifth Edition, June 2010, Test pressure 9.6.7 and per Table 9 to 10,000 psi in accordance with this product number. Hose burst pressure 9.6.7.2 exceeds the minimum of 2.5 times the working pressure per Table 9.

Quality:	QUALITY	Technical Supervisor :	PRODUCTION
Date :	1/27/2015	Date :	1/27/2015
Signature :		Signature :	



[Signature]
TEST DATE 12-15-15
TEST PRESSURE 10,000 PSI
GRADE 10.5
LENGTH 27
WORKING PRESSURE 5,000 PSI
ASSEMBLY DATE 12-15-15
END 14100 END 24100 IN