

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.
NMLC029395B

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

8. Well Name and No.
BISCUIT HILLS SWD 1

9. API Well No.
30-015-28142

10. Field and Pool or Exploratory Area
SWD;WOLFCAMP

11. County or Parish, State
EDDY COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other: INJECTION

2. Name of Operator
COG OPERARING LLC
Contact: DANA KING
E-Mail: dking@concho.com

3a. Address
600 W ILLINOIS
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-818-2267

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 29 T17S R31E Mer NMP SWSE 950FSL 1980FEL

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	Workover Operations
	<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 recompleat 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 recompleat 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.

This well is currently down for a failed MIT. COG Operating LLC respectfully requests to run a blanking plug to the packer, check for packer leak. Trip back in hole w/tbg replace any failed joints of IPC. Notify OCD to witness MIT, perform MIT. Acidize, turn SWD on, turn over to operations.

Please see attached procedure, wellbore diagram and submitted 3160-5.

RECEIVED

APR 24 2019

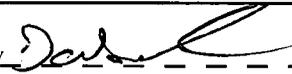
DISTRICT II-ARTESIA O.C.D.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #462289 verified by the BLM Well Information System For COG OPERARING LLC, sent to the Carlsbad

Name (Printed/Typed) DANA KING Title PERMIT SPECIALIST

Signature (Electronic Submission) Date 04/22/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By  Title Compliance Officer Date 4-25-19

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.

(Instructions on page 2)

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