UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

COCHS PARTIES IN	969	Artesta
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FORM APPROVED

OMB N	O. 1004	-013
Expires	July 31.	201

Lease Serial No.
NMLC029418B

SUNDRY NOTICES AND REPORTS ON WELLS				NMLC029418B 6. If Indian, Allottee or Tribe Name		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.						
SUBMIT IN TRIPLICATE - Other instructions on reverse side.			7. If Unit or CA/Agreement, Name and/or No			
Type of Well ☐ Gas Well ☐ Other				8. Well Name and No TEX MACK 11 FEDERAL 7		
Name of Operator COG OPERATING LLC COG OPERATING LLC Contact. KANICIA CARRILLO E-Mail kcarrillo@conchoresources com				9. API Well No. 30-015-36849-00-X1		
3a. Address 550 W TEXAS, STE 1300 FA MIDLAND, TX 79701		e No (include area code RECEIV		TO Field and Pool, or E FREN	xploratory	
4 Location of Well (Footage, Sec., T, R, M., or Survey Description) Sec 11 T17S R31E SWNE 1650FNL 2310FEL		NOV 1 8 20	109	11. County or Parish, and State EDDY COUNTY, NM		
12. CHECK APPI	ROPRIATE BOX(ES) TO INDICA	NMOCD ART		EPORT, OR OTHER	DATA	
TYPE OF SUBMISSION			F ACTION	· · · · · · · · · · · · · · · · · · ·		
If the proposal is to deepen direction: Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for f 10/29/09 Spud 17-1/2? @ 670. 10/30/09 TD 17-1/2? @ 672. hrs. Test BOP to 1200# for 30 11/01/09 TD 11? @ 1920. Ra 8:30am. Circ 142sx. WOC 1. 11/06/09 TD 7-7/8? @ 6655. 11/07/09 Ran 157jts 5-1/2 J58	Alter Casing Casing Repair Change Plans Convert to Injection C	face locations and measing on file with BLM/BIZ altiple completion or rection and requirements, including the completion of the completion	Reclama Recomp Recomp Tempor Water D Ing date of any pured and true vo A. Required su Circ 42sx. W 200sx C. tai	polete rarily Abandon Disposal proposed work and approx certical depths of all pertin- bsequent reports shall be new interval, a Form 3160 in, have been completed, a	ent markers and zones. filed within 30 days 0-4 shall be filed once	
14. Thereby certify that the foregoing is	true and correct. Electronic Submission #77164 ver For COG OPERATIN' nmitted to AFMSS for processing by	ified by the BLM Wel 3 LLC, sent to the C KURT SIMMONS on	II Information arlsbad 11/12/2009 (1	1 System 10KMS0234SE)		
Name (Printed/Typed) KANICIA	CARRILLO	Title PREPA	RER	 		
Signature (Electronic S	Submission)	Date 11/11/2	2009			
	THIS SPACE FOR FEDE	RAL OR STATE	OFFICE U	SE		
APPROVED BY ACCEPT	ED	CHRISTO TitlePETROLE	PHER WAL		Date 11/16/20	
certify that the applicant holds legal or equivalent would entitle the applicant to conditions.	· · · · · · · · · · · · · · · · · · ·	Office Carlsba			09	
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C Section 1212, make it a crime for a statements or representations as to any mat	ny person knowingly an ter within its jurisdiction	d willfully to m	nake to any department or	agency of the United	