| Form | 3160-5 |
|-------|--------|
| (Apnl | 2004) |

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No. 1001-0137 Expires. Marca 31, 2007 DEC 21 2009

OCD Artesia

| | BUILLAU OI LAND MA | MAGEMENT | | | 5 Lease Se | nal No | 1 | |
|--|--|--|--|--|--|-----------------|----------------------|--|
| SUNDRY NOTICES AND REPORTS ON WELLS | | | | NMLO | C029342B | NMOCD AR | | |
| Do not use t abandoned w | his form for proposals vell. Use Form 3160 - 3 | to drill or to (APD) for sucl | re-enter ar h proposals. | 1 | 6 If India | ın, Allottee or | ribe Name | |
| SUBMIT IN TRIPLICATE- Other instructions on reverse side. | | | 7. If Unit or CA/Agreement, Name and/or No | | | | | |
| 1 Type of Well ☐ ☐ Gas Well ☐ ☐ Other | | | | 8. Well Name and No. | | | | |
| Name of Operator COG Opera | ating LLC | | | | | s B Federal 1 | -3 Tank Btty | |
| 3a Address 3b Phone No. (include area code) 550 W. Texas Ave., Suite 1300 Midland, TX 79701 432-685-4372 | | | | | several 10. Field and Pool, or Exploratory Area | | | |
| 4 Location of Well (Footage, Sec., T., R., M., or Survey Description) | | | | | 75. Flord and Foot, of Exploratory Fred | | | |
| Sec 17, T17S, R30E, Unit F | | | | 11 County or Parish, State | | | | |
| | | | | | <u> </u> | County, NM | | |
| | PPROPRIATE BOX(ES) T | O INDICATE NA | ATURE OF N | OTICE, R | EPORT, O | ROTHER I |)ATA | |
| TYPE OF SUBMISSION | | | TYPE OF A | CTION | | | | |
| Notice of Intent Subsequent Report Final Abandonment Notice | Acidize Alter Casing Casing Repair Change Plans Convert to Injection | Deepen Fracture Treat New Construc Plug and Aban Plug Back | tion Rec | duction (Statements) complete nporarily Abter Disposal | Other Facility Diagram y Abandon | | | |
| Attached is the Facility Di Well #1, 2, 3, 4, 14, 18, 19, | agram for the Polarib B Fed | eral Wells in Unit I | 7 | | | | | |
| | • | | | | | | | |
| Accepted for Rec Approval Subject Date: 12-16-0 | et to Onsite Inspection | ons. | | | | | | |
| /s/ JD Whi | tlock Jr | | | , | | | | |
| 4 I hereby certify that the fore Name (Printed/Typed) Diane Knykenda | - | Titl | e Production | Manager | | | | |
| Signature | t 0.0 | Dat | e ll | 201 | 09 | | | |
| | THIS SPACE FOR | FEDERAL OF | | FFICE | USE | | | |
| | ` | | T | | | | | |
| approved by conditions of approval, if any, are a critify that the applicant holds legal which would entitle the applicant to | or equitable title to those rights | | Office | | \r | Date | | |
| itle 18 U.S.C. Section 1001 and Title ates any false, fictitious or fraudule | 43 USC Section 1212, make it | a crime for any perso | n knowingly an | d willfully to | o make to any | department of | agency of the United | |
| ares any raise, mentious of iraudule | an statements of representations | as to any matter with | m its jurisdictio | 11. | | | | |

(Instructions on page 2)



COG OPERATING LLC

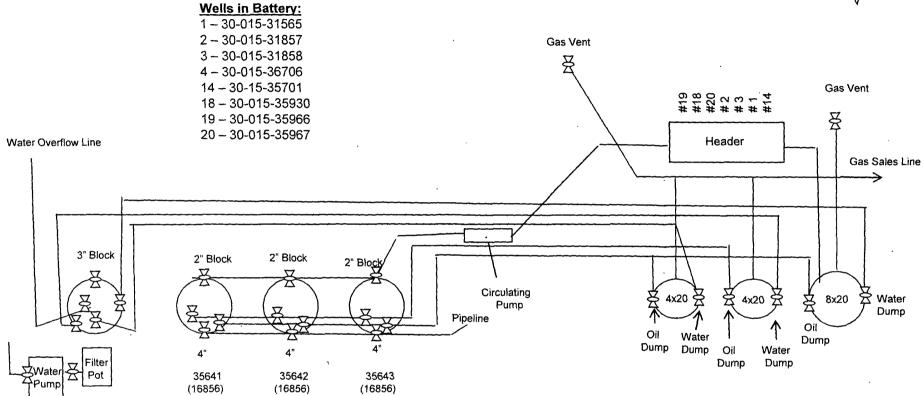
550 W. Texas Ave Ste 100 Midland, Texas 79701 (432)-683-7443

November 2009

POLARIS B 1-3 FEDERAL BATTERY

NMLC-029342B NE/SW, Sec 17, T17S, R30E, Unit F Eddy County, NM





3' line pipe oil fill lines-1 each dedicated to each heater