Form 3160-5 (August, 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

OCD Artesia	FORM APPROVE
	. OMB No. 1004- 01

137

BUREAU OF LAND MANAGEMENT					Expires: July 31, 2010			
					5. Lease Serial No.			
SUNDRY NOTICES AND REPORTS ON WELLS					NMNM117120			
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee, or Tribe Name			
SUBMIT IN TRIPLICATE - Other Instructions on page 2.			7. If Unit or CA	. Agreement Name	and/or No.			
1. Type of Well				<u></u>				
X Oil Well Gas Well Other					8. Well Name and No.			
2. Name of Operator		•			orning Federa	al #1H		
COG Operating LLC				9. API Well No.				
3a. Address					30-015-37644			
2208 W. Main Street			575-748-3303		10. Field and Pool, or Exploratory Area			
Artesia, NM 88210 Location of Well (Footage, Sec., T., R., M., or Survey Description) Lat.								
1980' FNL & 330' FWL, Unit E (SWNW)				Cedar Canyon; Bone Spring 11. County or Parish, State				
•	Long.	Long.		•	NM			
Sec 8-T24S-R29E				Edd	<u>y</u>	INIVI		
12. CHECK APPROPRIATE BOX(S	6) TO INDICATE NATU	RE OF NOTICE, REPO	RT, OR OTHER DA	ATA				
TYPE OF SUBMISSION	·	TYPE OF ACTION						
X Notice of Intent	Acidize	Deepen	X Production (Sta	X Production (Start/ Resume) Water Shut-		ut-off		
	Altering Casing	Fracture Treat	Reclamation		Well Integ	rity		
Subsequent Report	Casing Repair	New Construction	Recomplete	Recomplete		****		
	Change Plans	Plug and abandon	Temporarity Ab	Temporarily Abandon				
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposal	Water Disposal				
13. Describe Proposed or Completed Ope If the proposal is to deepen directic 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 final in	nally or recomplete horizontark will performed or provide operations. If the operation is bandonment Notice shall be	ally, give subsurface location the Bond No. on file with results in a multiple comple	ns and measured and n the BLM/ BIA. Requ tion or recompletion in	true vertical dep uired subsequent a new interval,	pths or pertinent reports shall be , a Form 3160-4	markers and sands. filed within 30 days shall be filed once		

This well was connected to pipeline and put online 11/3/10.

RECEIVED NOV 29 2010 NMOCD ARTESIA ACCEPTED FOR RECORD NOV 20 2010 ZAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)	Title:						
Stormi Davis	Regulatory Analyst						
Signature: Aloren David	Date: 11/4/10						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by:	Title:	Date:					
Conditions of approval, if any are attached. Approval of this notice does not warrant of certify that the applicant holds legal or equitable title to those rights in the subject least which would entitle the applicant to conduct operations thereo	se Office:						
Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime States any false, fictitiousor fraudulent statements or representations as to any matter within its jur		any department or agency of the United					
(Instructions on page 2)		20 87 M					