

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD- Artesia

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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.**

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMNM92180
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: CHASITY JACKSON E-Mail: cjackson@conchoresources.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 550 WEST TEXAS AVENUE SUITE 100 MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 432-686-3087	8. Well Name and No. CHARGER 29 FED 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T23S R30E SWNW 1780FNL 810FWL		9. API Well No. 30-015-28808-00-S1
		10. Field and Pool, or Exploratory EDDY
		11. County or Parish, and State EDDY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input checked="" type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

12/09/10 Set plug @ 5444. PU 2' Set packer and test CIBP to 2000#, good test. Release packer. TIH w/ retainer to 5270.  
12/12/10 Test lines to 4000#. Set retainer @ 5274. Hole approx 5395 - 5402. Cmt w/ 150sx H prem. Circ 4.5bbls to surface.  
12/13/10 Drill out retainer & 135' cmt, fell out @ 5407. Circ clean. Test squeeze to 1000# for 15min, good test.  
12/14/10 Drill out CIBP at 5444.  
12/15/10 Tag RBP @ 7100.  
12/16/10 Cmt w/ 25sx H on top of RBP @ 7100.  
12/19/10 Set packer @ 6500. Test plug to 1500# for 15min, ok. Release pkr.  
12/20/10 Set pkr @ 5425, get off on/off tool. RU REV uit, circ hole w 120bbls fresh water pkr fluid. MIT test for OCD/BLM, test to 520# for 30min, good test. RDMO.

Accepted for record

NMOCD

01/04/11

RECEIVED  
DEC 29 2010  
NMOCD ARTESIA

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #99516 verified by the BLM Well Information System</b> <b>For COG OPERATING LLC, sent to the Carlsbad</b> <b>Committed to AFMSS for processing by CHERYLE RYAN on 12/23/2010 (11CMR0179SE)</b>	
Name (Printed/Typed) CHASITY JACKSON	Title PREPARER
Signature (Electronic Submission)	Date 12/22/2010

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISOR EPS	Date 12/26/10
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 Carlsbad

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

**Additional data for EC transaction #99516 that would not fit on the form**

**32. Additional remarks, continued**

Written Order: 1006PS41W

