

## · UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0137

JAN 10 2011	Expires: July 31, 2010					
HOBBSUCDSUNI	5. Lease Serial No. NMNM118720					
HOBBSOCOSON abando	6. If Indian, All-	ottee, or Tribe Name				
	RIPLICATE - Other Inst			7. If Unit or CA	A. Agreement Name and/or No.	
1. Type of Well  X Oil Well  Gas Well	Other			8. Well Name a	and No.	
2. Name of Operator					erson B-52 Federal #4	
COG Operating LLC		3b. Phone No. (includ	da area coda)	9. API Well No	/	
3a. Address 2208 W. Main Street		<u> </u>	48-6946	10 Field and Po	30-025-39289 ool, or Exploratory Area	
Artesia, NM 88210  4. Location of Well (Footage, Sec., T., R., M.	, or Survey Description)	Lat.		Lusk; Bone Spring, North		
2310' FSL & 660' FWL, Unit	/	Long.		11. County or Parish, State		
Sec 5-T19S-R32E			DE OB OTHER D	Les	a NM	
12. CHECK APPROPRIATE BOX(S	S) TO INDICATE NATUR			AIA		
TYPE OF SUBMISSION			YPE OF ACTION			
X Notice of Intent	Acidize	Deepen	Production ( St	( Start/ Resume) Water Shut-off		
	Altering Casing	Fracture Treat	Reclämation		Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	
	Change Plans	Plug and abandon	Temporarily Al	oandon	BHL Change	
Final Abandonment Notice	Convert to Injection	Plug back			I any proposed work and approximate duration thereof	
COG Operating LLC responsible From: 2310' FSL & 660' FTO: 330' FSL & 660' FWL	FWL		ng BHL change:			
14. I hereby certify that the foregoing is true at Name (Printed/Typed)	nd correct.					
Stormi Davis		Title:	ulatory Analyst			
Signature: 14						
- Joseph John Joseph Jo	THIS SPACE FO	OR FEDERAL OR ST		E		
			POLÆUM ENGK		Date: FEB 0 8 2011	
Approved by:  Conditions of approval, if any are attached certify that the applicant holds legal or equ	uitable title to those rights in t	not warrant or he subject lease Office:	imategri cillin	WEEK I	Date: FEB U 0 2911	
which would entitle the applied Title 18 U.S.C. Section 1001 AND Title States any false, fictitiousor fraudulent statement	43 U.S.C. Section 1212, make	e it a crime for any perso	on knowingly and willf	ully to make an	y department or agency of the United	
(Instructions on page 2)						

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Dis	trict	1

State of New Mexico District I

1625 N. French Dr., Hobbs, NM 8824

District II

1301 W. Grand Avenue, Artesia, NM 88210

CONSERVATION DIVISION

District III District III
1000 Rio Brazos Rd., Aztec, NM 87410 JAN 10 ZUII District IV District IV
1220 S. St. Francis Dr., Santa Fe, NM PB BSUCD 1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102 Revised July 16, 2010 Submit one copy to appropriate District Office

☐ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT Pool Code Pool Name

<sup>1</sup> API Number		<sup>2</sup> Pool Code <sup>3</sup> Pool Name				me				
30	-025-392	89	41450			Lusk; Bone Spring, North				
<sup>4</sup> Property				<sup>5</sup> Property Name <sup>6</sup> Well Numbe					<sup>6</sup> Well Number	
37497	7			Patterson B-52 Federal 4						
OGRID No.					. 8 Operator Name				9 Elevation	
22913	7			COG Operating LLC 3654'					3654'	
					<sup>10</sup> Surface	Location			*****	
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
L	5	19S	32E		2310	South	660	West	Lea	

	Bottom Hole Location If Different From Surface									
Ü	L or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
İ	M	5	19S	32E		330	South	660	West	Lea
12 De	dicated Acres	13 Joint of	r Infill 14 C	onsolidation	Code 15 Or	der No.		L		
	80						*			
L										

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16			1 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretafore entered by the drivion.  1/6/11 Signature  Stormi Davis  Regulatory Analyst  Printed Name
790' 2 MT	,		<sup>18</sup> SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.
8HL			Date of Survey Signature and Seal of Professional Surveyor:  REFER TO ORIGINAL PLAT  Certificate Number