

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☐ Initial Report ☒ Final Report

| | | |
|--|-------------------------------------|--------------------------------------|
| Name of Company COG Operating LLC | Contact Pat Ellis | |
| Address 550 W. Texas, Suite 1300 Midland, Texas 79701 | Telephone No. (432) 685-4332 | |
| Facility Name Jenkins B Federal #10 | Facility Type Well Location | |
| Surface Owner: Federal | Mineral Owner | Lease No. (API#) 30-015-30668 |

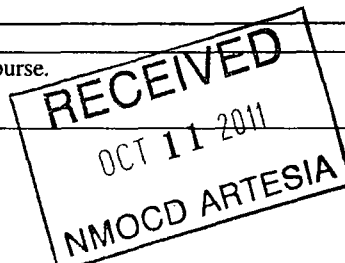
LOCATION OF RELEASE

| | | | | | | | | |
|-------------------------|----------------------|------------------------|---------------------|---------------|------------------|---------------|----------------|--------|
| Unit Letter C | Section 20 | Township 17S | Range 30E | Feet from the | North/South Line | Feet from the | East/West Line | County |
|-------------------------|----------------------|------------------------|---------------------|---------------|------------------|---------------|----------------|--------|

Latitude N 32 49.496° Longitude W 103 59.714

NATURE OF RELEASE

| | | |
|--|---|---|
| Type of Release: Produced Water | Volume of Release 10 bbls | Volume Recovered 5 bbls |
| Source of Release: Water Tank | Date and Hour of Occurrence 6/30/2011 | Date and Hour of Discovery 6/30/2011 10:15 a.m. |
| Was Immediate Notice Given? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Required | If YES, To Whom? Mike Bratcher - NMOCD | |
| By Whom? Josh Russo | Date and Hour | |
| Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If YES, Volume Impacting the Watercourse. N/A | |
| If a Watercourse was Impacted, Describe Fully.* N/A | | |



Describe Cause of Problem and Remedial Action Taken.*
The hose connection to the Jenkins B Federal #10 injection well rupture, causing the release. The well has been shut in and the hose has been replaced.

Describe Area Affected and Cleanup Action Taken.*

Prior to sampling site, COG scraped the pad with a backhoe and transported the excavated soil to proper disposal. Tetra Tech inspected the site and collected samples to assess the spill area. Based on the assessment data, none of the samples exceeded the RRAL for TPH and BTEX. In addition, the chloride concentrations do not appear an environmental concern. Tetra Tech prepared closure report and submitted to NMOCD for review and approval.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

| | | | |
|--|------------------------------|--------------------------------------|-----------------------------|
| Signature: | | OIL CONSERVATION DIVISION | |
| Printed Name: Ike Tavarez (agent for COG) | | Approved by District Supervisor: | |
| Title: Project Manager | | Approval Date: 4/23/15 | Expiration Date: N/A |
| E-mail Address: Ike.Tavarez@TetraTech.com | | Conditions of Approval: Final | |
| Date: 9-9-11 | Phone: (432) 682-4559 | Attached <input type="checkbox"/> | |

* Attach Additional Sheets If Necessary

2RP-819