Form 3160-5 (August, 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD Artesia

FORM APPROVED OMB No 1004-0137

Expires July 31, 2010

## SUNDRY NOTICES AND REPORTS ON WELLS

NMNM100555

Lease Serial No

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, Al	lottee, or Tribe Name	
SUBMIT IN TRIPLICATE - Other Instructions on page 2.				7. If Unit or Ca	A Agreement Name and/or No	
1 Type of Well  Soil Well Gas Well Other				8 Well Name and No.		
Name of Operator COG Production LLC				9 API Well No	poper 31 Federal #311	
3a Address	3b Phone No (incli	3b Phone No (include area code)		30-015-37749  10 Field and Pool, or Exploratory Area		
2208 W. Main Street Artesia, NM 88210		575-7	575-748-6940			
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)		Lat.	Lat.		North Brushy Draw; Delaware	
1650' FNL & 990' FEL Unit Letter H (SENE) Sec 31-25S-29E Long.				11 County or I Eddy C		
12 CHECK APPROPRIATE BOX	X(S) TO INDICATE NATUR	E OF NOTICE, REPO	RT, OR OTHER D	ATA		
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	Acıdize	Deepen	Production ( S	tart/ Resume)	Water Shut-off	
_	Altering Casing	Fracture Treat	Reclamation		Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	
_	Change Plans	Plug and abandon	Temporarily A	bandon	Change of Operator	
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposa	d		
testing has been completed Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)  This is notification of Change of Operator on the above referenced well.  COG Production LLC, as a new operator, accepts all applicable terms, conditions, stipulations and restrictions concerning operations conducted on this lease or portion of lease described.						
Bond Coverage: BLM Bond File No: NMB006970740				A	PPROVED	
Change of Operator Effecti	RECE	IVED				
Former Operator: OGX Re	DEC 2	8 2011		DEC 2 6 2011		
SEE ATTACHI	NMOCD	ARTESIA	1 1/	P.D. Whitlock &		
CONDITIONS	OF APPROVAL			BURE.	AU OF LAND MANAGEME <b>NT</b> ARLSBAD FIELD OFFICE	
14 I hereby certify that the foregoing is true	and correct	i	<del></del>			
Name (Printed Typed)  Mayte Reyes		Title Reo	ulatory Analyst			
Signature: A A	Date	D				
- Tulugu	THIS SPACE FO	DR FEDERAL OR ST	20/11 TATE OFFICE US	F		
<del></del>	3, 7,0=1					
Approved by.  Conditions of approval, if any are attack					Date	
certify that the applicant holds legal or	equitable title to those rights in th	ne subject leaseIOffice				