Form 3160-5 (August, 2007)

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

FORM APPROVED OMB No 1004-0137

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.					5 Lease Serial IV	NMNM12559	
					6 If Indian, Allot	tee, 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  X Oil Well  Gas Well Other					8 Well Name and	d No	
2 Name of Operator						Cottonmouth 13 Federal Com #1H	
COG Production LLC					9 API Well No		
3a Address 2208 W. Main Street			3b Phone No (include area code)		30-015-39734		
Artesia, NM 88210	Artesia, NM 88210			575-748-6946		10 Field and Pool, or Exploratory Area	
4 Location of Well (Footage, Sec., T, R,		מ דיאני פארי	DE	Lat. Red R	County or Par	Hollow; Bone Spring, S.	
SHL: 810' FSL & 2630' FWL, Unit N (SESW) Sec 13-T26S-R28E  BHL: 316' FSL & 2254' FWL, Unit N (SESW) Sec 24-T26S-R28E  Long.					Eddy	,	
12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER D.					DATA		
TYPE OF SUBMISSION TYPE OF ACTION							
Notice of Intent	Acidize	Deepen		Production (	(Start/Resume)	Water Shut-off	
	Altering Casing	Frac	ture Treat	Reclamation	1	Well Integrity	
X Subsequent Report	Casing Repair	Nev	v Construction	Recomplete		X Other	
	Change Plans	Plug	and abandon	Temporarily	Abandon	Completion Operations	
Final Abandonment Notice	Convert to Injection	Plug	back	Water Disposal			
3/9/12 to 3/28/12 MIRU W sand & 3539939 gal fluid. 3/29/12 to 4/30/12 Flowing 5/8/12 to 5/11/12 Drilled of 5/12/12 Began flowing back 5/14/12 Set 2 7/8" 6.5# L-8 5/18/12 Placed on gas lift sy	ate clean.	. آ		ACCEPTED FOR RECORD  JUN 1 6 2012			
2102			I NUL		CARLSE	F LAND MANAGEMENT BAD FIELD OFFICE	
BECEINED							
14. I hereby certify that the foregoing is true Name (Printed/ Typed)	and correct						
Stormi Davis		Title Regulatory Analyst					
Signature	-	Date 5/31/12					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by	/		Title		Dat	ie.	
Conditions of approval, if any are attached certify that the applicant holds legal or e			nt or				
	icant to conduct ope	rations the	reon.	knowingly and w	illfully to make any	department or agency of the United	
States any false, fictitiousor fraudulent statemen				MIOWINGIY AND W	mony to make any	department of agency of the Officed	