

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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC028793C
2. Name of Operator COG OPERATING LLC Contact: ROBYN ODOM E-Mail: rodom@concho.com		6. If Indian, Allottee or Tribe Name
3a. Address 550 WEST TEXAS AVE, STE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4385	7. If Unit or CA/Agreement, Name and/or No NMNM88525X
4. Location of Well (Footage, Sec., T, R, M., or Survey Description) Sec 18 T17S R30E 585FSL 465FWL		8. Well Name and No. BURCH KEELY UNIT 18 FEDERAL 8H
		9. API Well No. 30-015-39578
		10. Field and Pool, or Exploratory GRAYBURG JACKSON
		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 checked="" 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 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 type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

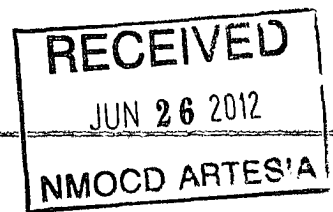
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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.)

In order for the OCD to be able to allocate this well to the correct property code:

COG Operating respectfully requests permission to change the name and number of this well to:

Burch Keely Unit #188H

A Revised C-102 is attached for your review.

**SUBJECT TO LIKE
APPROVAL BY STATE**

14. I hereby certify that the foregoing is true and correct Electronic Submission #140405 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 06/18/2012 ()	
Name (Printed/Typed) ROBYN ODOM	Title PERSON RESPONSIBLE
Signature (Electronic Submission)	Date 06/12/2012

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <i>J. D. Huttoch</i>	Title <i>LPE7</i>	Date <i>6/23/12</i>
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 <i>CF0</i>

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number

30-015-39578

Property Code

308086

OGRID No

229137

Property Name

BURCH KEELY UNIT

COG

LLC

UL or lot No. Section To
4 18 1

UL or lot No. Section To
P 18 1

Dedicated Acres Joint or Intill

157.43

NO ALLOWABLE WILL BE ASSIGNED TO

VISION

SECTION, QUARTER & SIXTEENTH CORNER
COORDINATES

(A) - Y=666096.9, X=596505.0

(B) - Y=664776.8, X=596506.9

(C) - Y=664786.2, X=599063.8

(D) - Y=666116.7, X=601700.9

(E) - Y=664796.4, X=601705.4

37.37 AC

LOT 2

SURFACE LOCATION

Y=665363.4 N

X=596971.0 E

37.39 AC

LOT 3

600'

O

BOTTOM HOLE LOCATION
Y=665125.0 N

LOT 4

Project Area

Robyn M. Odom

Printed Name

Rodom@concho.com

E-mail Address

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

JULY 13, 2011

37.43 AC

AF/DSR Rel WO#11-35-2456 JWSC WO 12 13 1040