

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**RECEIVED**  
DEC 27 2012  
NMOCD 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. NMNM96836	
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name	
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701		7. If Unit or CA/Agreement, Name and/or No.	
3b. Phone No. (include area code) Ph: 432-221-0467		8. Well Name and No. SPRUCE FEDERAL 3	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T17S R27E NESW 1328FSL 1501FWL		9. API Well No. 30-015-40197-00-S1	
		10. Field and Pool, or Exploratory RED LAKE	
		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 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 checked="" 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 Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recomplete 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 recompletion 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.)

9/17/12 test csg to 3500 psi for 30 min, 5200 psi for 8 min, test good  
 9/18/12 PBTD @4671, perf lower blinebry 4266-4466, 26 shots; 1 spf acidize w/2500 gal 15%, frac w/119730 gals gel carrying 151,383# 16/30 brown + 35,111# SP, perf middle blinebry 3966-4166, 26 shots, 1 spf, acidize w/2500 gal 15%, frac w/117,283gals gel carrying 148,582# 16/30 brown+ 29,570# SP, perf upper blinebry 3666-3866' 26 shots, 1 spf, acidize w/2500 gal 15%, frac w/115,787 gals gel carrying 145,406# 16/30 brown + 36,563# SP, perf paddock 3200-3450, 26 shots, 1 spf, acidize w/2000 gal 15%, frac w/104,877 gals gel carrying 122,848# 16/30 brown + 15,257# SLC.  
 9/24/12 tag sand @3420, clean out to PBTD @4675'  
 10/01/12 RIH W/ PROD. TBG RIH W/2 7/8 J-55 GB TBG. EOT@ 4428'. 2 7/8 BULL PLUG, 6-2 7/8 MUD JTS., 2707G DESANDER, SN@ 4212', 35- 2 7/8 JTS., TAC@ 3073', 2- 2 7/8 JTS., 2 7/8 X 2' MARKER JT., 92- 2 7/8 JTS. TO SURFACE, RIH W/2 1/2 X 2 X 24' TRASH PUMP (QUINN PUMP), CENTRALIZING ALIGNMENT TOOL, 26K SHEER TOOL, 1 X 7/8 LIFT SUB, 16- 11/2 SINKER BARS, 97- 7/8 N90 STEEL RODS, 35-11/4 (TRC) FG

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #166066 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by KURT SIMMONS on 12/18/2012 (13KMS4204SE)**

Name (Printed/Typed) BRIAN MAIORINO	Title AUTHORIZED REPRESENTATIVE <i>CRD/CRD</i>
Signature (Electronic Submission)	Date 12/17/2012

**Accepted for record  
1/3/13  
NMOCD**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISOR EPS	Date 12/22/2012
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 Carlsbad

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.

**Additional data for EC transaction #166066 that would not fit on the form**

**32. Additional remarks, continued**

RODS, 1-1 1/4 x 9' FG SUB, 1- 1 1/4 X 6' FG SUB, 1 1/2 X 26' POLISH ROD, hang well, turn over to production