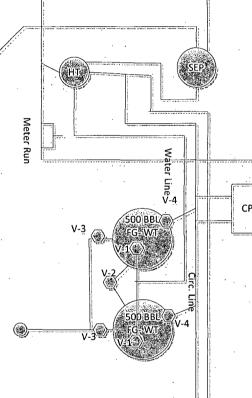
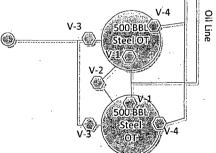
ê		1					
Form 3160- 5	STATES	5		1	FORM APPR	OVED	
(August, 2007)	OF THE INTERIOR OCD Artesia			OMB No. 1004- 0137			
	BUREAU OF LAN	D MANA	.GEMENT		C. Turn Caria	Expires: July 3	1, 2010
SUI	NDRY NOTICES ANI	D REPOI	RTS ON WE	LLS	5. Lease Seria	NMNM10	8027
	osals to drill or to re-enter an 60-3 (APD) for such proposals.			6. If Indian, Allottee, or Tribe Name			
	TRIPLICATE - Other In			<u> </u>	7. If Unit or C	A. Agreement Nar	me and/or No.
1. Type of Well			s on page 2.		-		
Cil Well Gas Well	Other				8. Well Name and No.		
2. Name of Operator COG Operating LLC					9. API Well N	$\frac{10}{0}$	Federal #3
3a. Address		3b	, Phone No. (includ	le area code)	30-015-39823		
2208 W. Main Street Artesia, NM 88210		575-748-6940			10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		Lat.			WC-015 G-02 S262503L;Bone Spring		
SHL: 1980' FSL & 660' FWL, Sec 33-T26S-R25E		Long.			11. County or Parish, State Eddy County NM		
12. CHECK APPROPRIATE BOX	(S) TO INDICATE NATI	IRF OF N	OTICE REPO	RT OR OTHER D		_ounty	
TYPE OF SUBMISSION			-	PE OF ACTION		<u> </u>	
- Notice of Intent			epen	Production (St	art/ Resume)	Water S	
, 	Altering Casing		acture Treat	Reclamation		Well In	tegrity
X Subsequent Report	Casing Repair	Ne	ew Construction	Recomplete		X Other	<u></u>
	Change Plans	Ph	ig and abandon	Temporarily Al	oandon	<u>S</u> :	ite Facility
Final Abandonment Notice	Convert to Injection	Ph	ıg back	Water Disposa	1		
Please see attached Site Facility Diagram.		ACCEPTED for record					
		RE	CEIVE				
		MAR 2 6 2013					
				Acco	ntad fan D	1.5	
		NMOCD ARTESIA Accer Appr Date:			pted for Record Purposes. oval Subject to Onsite Inspection.		
			·		7	mio	
14. I hereby certify that the foregoing is true Name (Printed/ Typed)	and correct.		1				
Amy Avery			Title: Reg	ulatory Technicia	n		
Signature: Amy Ave	ru		Date: 3/11				
	THIS SPACE	FOR FED		ATE OFFICE US	E		· · · · · · · · · · · · · · · · · · ·
Approved by:			Title:			Date:	
Conditions of approval, if any are attach certify that the applicant holds legal or e which would entitle the appl	equitable title to those rights in licant to conduct ope	the subject rations th	ant or lease Office: hereon.				
Title 18 U.S.C. Section 1001 AND Title States any false, fictitiousor fraudulent statem				n knowingly and willf	ully to make a	ny department or	agency of the Unit
(Instructions on page 2)							1

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COG Operating LLC Yellowstone 3 Federal #3 NMNM108027 30-015-39823 Sec. 3-T26S-R25E Eddy County, NM

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Yellowstone 3 Federal #3

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COG Operating LLC Yellowstone 3 Federal #3 NMNM108027 30-015-39823 Sec 3-T26S-R25E Eddy County, NM

1. Production Phase (OT#1)

- A. Valves #1,#2,#4,#5,#6,#8 Open
- B. Valve #3 Closed and Sealed
- C. Valve #7 Closed
- D. Valves on OT #2 and #3 Positioned:
 - 1. Valves #1,#2B,#3 Closed and sealed

Production Phase (OT #2)

- A. Valves #1,#2,#4,#5,#6;#8 Open
- B. Valve #3 Closed and Sealed
- C. Valve #7 Closed
- D. Valves on OT #1 and #3 Positioned:
 - 1. Valves #1,#2,#3,#4 Closed and Sealed

II. Sales Phase (OT#1)

- A. Valves #1,#2 and #4 Closed and Sealed
- B. Valve #3 on OT #1 Open
- C. Valves on OT #2 and #3 Positioned:
 - 1. Valve #1 & #2 Open
 - 2. Valve #3 and #4 Closed and Sealed

Sales Phase (OT#2)

- A. Valves #1,#2and #4 Closed and Sealed
- B. Valve #3 on OT #2 Open
- C. Valves on OT #1 and #3 Positioned:
 - 1. Valve #1 Open
 - 2. Valve #3 and #4 Closed and Sealed