2. Name of Operator Contact: KANICIA CASTILLO 2. Name of Operator Contact: KANICIA CASTILLO COG OPERATING LLC E-Mail: kcastillo@conchoresources.com 30-015-35816 3a. Address ONE CONCHO CENTER 600 W. ILLINOIS AVENUE MIDLAND, TX 79701 4. Location of Well (Footage, Sec., T. R., M., or Survey Description) Sec 15 T17S R31E Mer NMP 2310FNL 1890FWL 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Alter Casing Practure Treat Reclamation Acidize Prinal Abandonment Notice Change Plans Plug and Abandon Recomplete Change Plans Plug and Abandon Recomplete Convert to Injection Plug Back Venting and/or Flaring Soubsequent Report Convert to Injection Plug Back Venting and/or Flaring 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 nearured 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/BLA Required subsequent reports 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.) RECEIVED HELD NOTICE CONCHOCK SERVICE OF ACTION 10. Field and Pool, or Exploratory FREN 11. County or Parish, and State EDDY COUNTY, NM 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 13. Production (Start/Resume) Production (Start/Resume) Production (Start/Resume) Water Shut-Off Well Integrity Water Shut-Off Well Integrity Water Disposal 3. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the pr	orm 3160-5 August 2007) DE BI SUNDRY Do not use the abandoned were	Artesia	FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No. NMLC029420A 6. If Indian, Allottee or Tribe Name				
2. Name of Operator Contact: KANICIA CASTILLO 2. Name of Operator COG OPERATING LLC E-Mail: kcastillio@conchoresources.com 3. Address ONE CONCHO CENTER 600 W. ILLINOIS AVENUE MIDLAND, TX 79701 3. Address ONE CONCHO CENTER 600 W. ILLINOIS AVENUE MIDLAND, TX 79701 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 5. Phone No. (include area code) Ph: 432-685-4332 11. Country 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 12. Notice of Intent Acidize Deepen Production (Start/Resume) Water Shut-Off Alter Casing Practure Treat Reclamation Well Integrity Subsequent Report Acidize Plug and Abandon Temporarily Abandon Concepted Construction Recomplete Change Plans Plug and Abandon Temporarily Abandon Concepted Concepted Proposed or Completed Operation (clearly state all pertinent datalls, 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/BLA. Required subsequent reports 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.) COG Operating LLC, respectfully request to flare at the Skelly Unit #968 Battery.	SUBMIT IN TRI	PLICATE - Other instruction	ns on reverse side.		7. If Unit or CA/Agree	ement, Name and/or No.	
COG OPËRATING LLC E-Mail: kcastillo@conchoresources.com 30-015-35816	Type of Well Gas Well	,					
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See etterbment for API #'s	If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for final COG Operating LLC, respectf	ally or recomplete horizontally, give ik will be performed or provide the operations. If the operation results andonment Notices shall be filed or inal inspection.) ully request to flare at the Sk	e subsurface locations and measu Bond No. on file with BLM/BIA in a multiple completion or reco nly after all requirements, includ elly Unit #968 Battery.	red and true ve Required submpletion in a name in a	ertical depths of all pertin beequent reports shall be new interval, a Form 316 n, have been completed, a	ent markers and zones. filed within 30 days 0-4 shall be filed once and the operator has	
	See attachment for API #'s.	and the contract of the contra	for record			- !	

150 Oil/Day 500 MCF/Day Requesting 90 day approval from 6/04/13 to 9/04/13 SUBJECT TO LIKE APPROVAL BY STATE

JUL 09 2013 nmged aftaghed for CONDITIONS OF APPROVAL

14. I hereby certify that th	e foregoing is true and correct. Electronic Submission #210134 verifie For COG OPERATING Lt Committed to AFMSS for processing	.C, ser	it to the Ca	ırlsbad			
Name(Printed/Typed)	KANICIA CASTILLO	Title	PREPAI	RER			•
Signature	(Electronic Submission)	Date	06/10/20	013			·
	THIS SPACE FOR FEDERA	L OR	STATE	OFFICE US	E COVED		
Approved By	// / / / /	Title		APPN	TOVED	Date	
Conditions of antioval, if try, are attached. Approval of this notice does not warrant or certify that the applicant folds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			e	JUL -	5 2013		
Title 18 U.S.C. Section 100 States any false, fictitious	I and Title 43 U.S.C. Section 1212, make it a crime for any pe or fraudulent statements or representations as to any matter w	erson kno ithin its	owingly and jurisdictio B [JREAU OF LAN	e to any department	t or agency of the	United .

NMOCD

Additional data for EC transaction #210134 that would not fit on the form

32. Additional remarks, continued

Due to Frontier Shut in.

Schematic attached.

Flare Request Form

Skelly Federal 968 Battery Battery-Production-150bo-500mcf Total BTU of Htrs-2,000,000 6/4/2013 Flare Start Date-Flare End Date- 9/4/2012 UL Sec-T-R-F-15-17S-31E GPS-N 32* 50'08.02" W 103* 51'34.50" # of wells to be flared- 16 # of wells in bty-Gas purchaser- Frontier Reason For Flare-Frontier Shutdown

Site Diagram





Flare

 Well#	API Number	
 603	30-015-36728	
636	30-015-37090	
637	30-015-37089	Skelly Unit 968
638	30-015-37084	
639	30-015-37083	
640	30-015-37085	
823	30-015-37982	
824	30-015-37668	
836	30-015-37909	
966	30-015-35969	
968	30-015-35816	
970	30-015-35817	
994	30-015-36588	
996	30-015-36729 .	
997	30-015-36474	,
998	30-015-36681	











BUREAU OF LAND MANAGEMENT Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

7/2/2013 Condition of Approval to Flare Gas

- 1. Report all volumes on OGOR reports.
- 2. Comply with NTL-4A requirements
- 3. Subject to like approval from NMOCD
- 4. Flared volumes will still require payment of royalties
- 5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5.
- 6. This approval does not authorize any additional surface disturbance.
- 7. Submit updated facility diagram as per Onshore Order #3.
- 8. Approval not to exceed 90 days for date of approval.
- 9. Submit Subsequent Report with actual volumes of gas flared for each month gas is flared.
- 10. If flaring is still required past 90 days submit new request for approval.
- 11. If a portable unit is used to flare gas it must be monitored at all times.
- 12. Comply with any restrictions or regulations when on State or Fee surface.

JDB722013