

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION

ARTESIA DISTRICT

SEP 18 2014

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.

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM97123
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: AMANDA AVERY E-Mail: aavery@concho.com		7. If Unit or CA/Agreement, Name and/or No. NMNM114024
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 575-748-6940	8. Well Name and No. SAGEBRUSH FEDERAL COM 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T18S R27E NWSE 1800FSL 1980FEL		9. API Well No. 30-015-33910-00-S1
		10. Field and Pool, or Exploratory ANGEL RANCH
		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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Site Facility Diagram/Security Plan
	<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.)

Please see attached Site Facility Diagram.

APD 9-26-14
Accepted for record
NM OOD

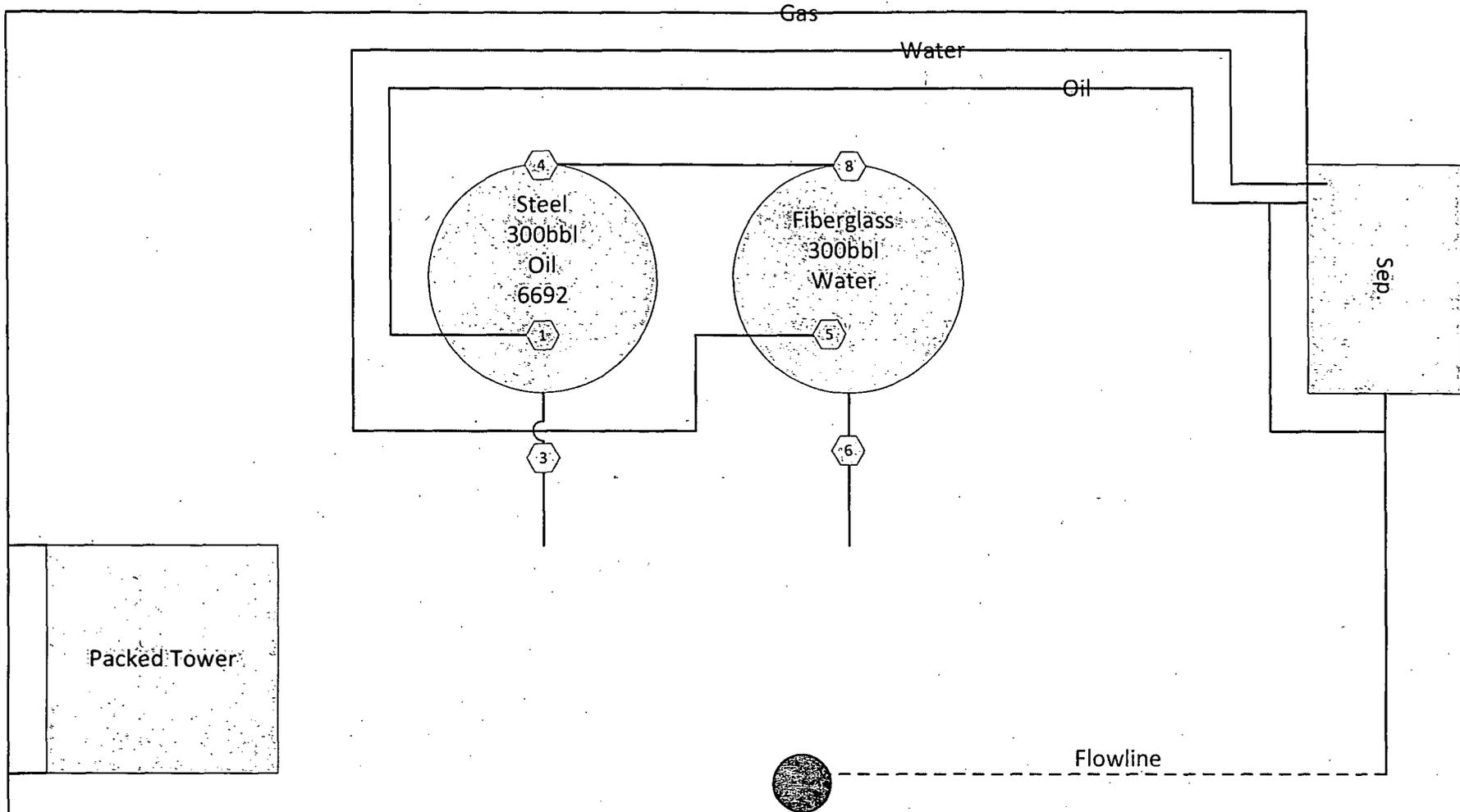
Accepted for Record Purposes.
Approval Subject to Onsite Inspection.
Date: 9/10/14
[Signature]

14. I hereby certify that the foregoing is true and correct. Electronic Submission #249705 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by CATHY QUEEN on 06/19/2014 (14CQ0504SE)	
Name (Printed/Typed) AMANDA AVERY	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 06/16/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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 _____

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.



Accepted for Record Purposes.
 Approval Subject to Onsite Inspection.
 Date: *9/10/14*
[Signature]

Sage Brush Federal Com #1
 NMNM97123
 30-015-33910
 34/18E/27E
 Eddy County

CONCHO
 COG Operating LLC.
 2208 W Main St.
 Artesia, NM 88210



Sage Brush Federal Com #1

NMNM97123

30-015-33910

34/18E/27E

Eddy County

I. Production Phase (OT#1)

- A. Valves #1, #4, #5, and #8 Open
- B. Valve #3 Closed and Sealed
- C. Valve #6 Closed

II. Sales Phase (OT#1)

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