Form 3160-5 (August 2007)	UNITED STATES EPARTMENT OF THE INTE	RIOR	19918	OMB N	APPROVED IO. 1004-0135	
B SUNDRY	IENT S ON WELLS	-	Expires: July 31, 2010 5. Lease Serial No. NMNM104666			
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TR	IPLICATE - Other instruction	s on reverse side.		7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well			8. Well Name and No. JHS FEDERAL 1H			
2. Name of Operator COG OPERATING LLC	RMI DAVIS .com	9. API Well No. 30-015-37479-00-S1				
3a. Address ONE CONCHO CENTER 60 MIDLAND, TX 79701	Phone No. (include area code) : 575-748-6946 : 575-748-6968		10. Field and Pool, or Exploratory UNDESIGNATED			
4. Location of Well (Footage, Sec., 7	· ·		11. County or Parish,	and State		
Sec 23 T26S R25E SENE 16			EDDY COUNT	Y, NM		
12. CHECK APP	ROPRIATE BOX(ES) TO INI	DICATE NATURE OF N	NOTICE, RE	PORT, OR OTHE	R DATA	
TYPE OF SUBMISSION		TYPE OF	TYPE OF ACTION			
□ Notice of Intent	C Acidize	Deepen	Productio	on (Start/Resume)	UWater Shut-Off	
Subsequent Report	□ Alter Casing	Fracture Treat	Reclamat	1	Well Integrity	
	Casing Repair	New Construction			🔀 Other Venting and/or Flari	
Final Abandonment Notice	 Change Plans Convert to Injection 	Plug and Abandon Plug Back	 Temporarily Abandon Water Disposal 		ng	
Attach the Bond under which the wo following completion of the involved	ally or recomplete horizontally, give s rk will be performed or provide the B l operations. If the operation results in pandonment Notices shall be filed onl	subsurface locations and measu ond No. on file with BLM/BIA n a multiple completion or reco	red and true vert Required subs impletion in a ne	ical depths of all pertine equent reports shall be winterval, a Form 316	nent markers and zones. filed within 30 days 0-4 shall be filed once	
This well flared 2650 MCF inte pressure.	ermittently in November, 2013	as a result of curtailment	due to line	RAD 2/11/15	· ·	
Rejected	nee Pl	d NOI	nq	MOCE	g to	
				NM OI	L CONSERVATION	
14. Thereby certify that the foregoing is	true and correct. Electronic Submission #23187 For COG OPERA mitted to AFMSS for processing	'9 verified by the BLM Well ATING'LLC, sent to the Ca	Information S	System	FEB 3 2015	
Name(Printed/Typed) STORMI	Title PREPAR			RECEIVED		
Signature (Electronic S	Date 01/13/20)14)		
· · · ·	THIS SPACE FOR FI	EDERAL OR STATE	OFFICE US		/	
Approved By	Title	Title mm Mm, Aprologiater				
Conditions of approval, if any, are attached certify that the applicant holds legal or equivient would entitle the applicant to condu		Office 01 Da Dolot				
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a crime tatements or representations as to any	for any person knowingly and matter within its jurisdiction.	willfully to make	to any department or	agency of the United	
** BLM REVI	SED ** BLM REVISED ** E	BLM REVISED ** BLM	REVISED *	* BLM REVISEI) **	