

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOC
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.

5. Lease Serial No.
NMLC028793A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM88525X

8. Well Name and No.
Multiple--See Attached

9. API Well No.
Multiple--See Attached

10. Field and Pool, or Exploratory
BURCH KEELY-GLORIETA-UPPER YE

11. County or Parish, and State
EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
COG OPERATING LLC
Contact: ONETHA B AARON
E-Mail: OAARON@CONCHO.COM

3a. Address
600 W ILLINOIS AVENUE
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-818-2319
Fx: 432-221-0858

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Multiple--See Attached

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 Venting and/or Flaring
	<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 recompleat 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 recompleat 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.)

Actual gas flared for this battery for 11/7/13 to 2/7/14 is as follows:

(Permit approval: Electronic Submission #226115)

NOV Total for Battery = 0 mcf
DEC Total for Battery = 0 mcf
JAN Total for Battery = 0 mcf
FEB Total for Battery = 0 mcf

Number of wells flared: (6)

BURCH-KEELY UNIT #418 30-015-36183

NM OIL CONSERVATION
ARTESIA DISTRICT
OCT 30 2015

Accepted for record
NMOC

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #253748 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by CATHY QUEEN on 07/15/2015 (14AXM0066SE)

Name (Printed/Typed) ONETHA B AARON Title ENGINEERING TECH

Signature (Electronic Submission) Date 07/18/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____
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
OCT 27 2015
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Additional data for EC transaction #253748 that would not fit on the form

Wells/Facilities, continued

Agreement	Lease	Well/Fac Name, Number	API Number	Location
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 654	30-015-40280-00-S1	Sec 19 T17S R30E NWNE 660FNL 1805FEL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 418	30-015-36183-00-S1	Sec 18 T17S R30E SESE 25FSL 900FEL 32.827430 N Lat, 104.005720 W Lon
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 643	30-015-39570-00-S1	Sec 19 T17S R30E SENW 1535FNL 2310FWL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 651	30-015-40278-00-S1	Sec 19 T17S R30E Lot 2 1474FNL 922FWL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 914	30-015-40300-00-S1	Sec 19 T17S R30E NENW 995FNL 2289FWL
NMNM88525X	NMLC028793A	BURCH KEELY UNIT 965H	30-015-40973-00-S1	Sec 19 T17S R30E SENE 2350FNL 493FEL

32. Additional remarks, continued

BURCH-KEELY UNIT #643 30-015-39570
BURCH-KEELY UNIT #651 30-015-40278
BURCH-KEELY UNIT #654 30-015-40280
BURCH-KEELY UNIT #914 30-015-40300
BURCH-KEELY UNIT #965H 30-015-40973

Reason: DCP SI