

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
ArtesiaFORM 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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC028793A
2. Name of Operator COG OPERATING LLC Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com		6. If Indian, Allottee or Tribe Name
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4332	7. If Unit or CA/Agreement, Name and/or No. NMNM88525X
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Multiple--See Attached		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

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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	Venting and/or Flaring
	<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.)

COG Operating LLC, respectfully requests to flare at the Burch Keely Unit 19A battery.

Number of wells to flare (11)

BURCH-KEELY UNIT #418 30-015-36183
BURCH-KEELY UNIT #651 30-015-40278
BURCH-KEELY UNIT #626 30-015-40276
BURCH-KEELY UNIT #644 30-015-39571
BURCH-KEELY UNIT #656 30-015-40005
BURCH-KEELY UNIT #788 30-015-40706
BURCH-KEELY UNIT #654 30-015-40280
BURCH-KEELY UNIT #657 30-015-39567

Accepted for record
NMOCD
NM OIL CONSERVATION
ARTESIA DISTRICT
NOV 30 2015

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Electronic Submission #300131 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by CATHY QUEEN on 07/14/2015 15CQ0464SER	
Name (Printed/Typed) KANICIA CASTILLO	Title PREFABER
Signature (Electronic Submission)	Date 05/01/2015
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.	

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #300131 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 NWN 660FNL 1805FEL
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
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

32. Additional remarks, continued

BURCH-KEELY UNIT #965H (FKA 19-4H) 30-015-40973
BURCH-KEELY UNIT #914 30-015-40300
BURCH-KEELY UNIT #643 30-015-39570

130 Oil
750 MCF

Requesting to flare from 5/01/15 - 8/01/15

Planned midstream curtailment.

Revisions to Operator-Submitted EC Data for Sundry Notice #300131

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	FLARE NOI	FLARE NOI
Lease:	NMLC028793A	NMLC028793A
Agreement:	NMNM88525X	NMNM88525X (NMNM88525X)
Operator:	COG OPERATING LLC ONE CONCHO CENTER 600 W ILLINOIS AVE MIDLAND, TX 79701 Ph: 432-685-4332	COG OPERATING LLC 600 W ILLINOIS AVENUE MIDLAND, TX 79701 Ph: 432.685.4385
Admin Contact:	KANICIA CASTILLO PREPARER E-Mail: kcastillo@concho.com Ph: 432-685-4332	KANICIA CASTILLO PREPARER E-Mail: kcastillo@concho.com Ph: 432-685-4332
Tech Contact:	KANICIA CASTILLO PREPARER E-Mail: kcastillo@concho.com Ph: 432-685-4332	KANICIA CASTILLO PREPARER E-Mail: kcastillo@concho.com Ph: 432-685-4332
Location:		
State:	NM	NM
County:	EDDY	EDDY
Field/Pool:	BURCH KEELY;GLORIETA YESO	BURCH KEELY-GLORIETA-UPPER YES
Well/Facility:	BURCH KEELY UNIT 654 Sec 19 T17S R30E Mer NMP 660FNL 1805FEL	BURCH KEELY UNIT 654 Sec 19 T17S R30E NWNE 660FNL 1805FEL BURCH KEELY UNIT 643 Sec 19 T17S R30E SENW 1535FNL 2310FWL BURCH KEELY UNIT 651 Sec 19 T17S R30E Lot 2 1474FNL 922FWL BURCH KEELY UNIT 914 Sec 19 T17S R30E NENW 995FNL 2289FWL BURCH KEELY UNIT 965H Sec 19 T17S R30E SENE 2350FNL 493FEL BURCH KEELY UNIT 418 Sec 18 T17S R30E SESE 25FSL 900FEL 32.827430 N Lat, 104.005720 W Lon

Flaring Conditions of Approval

1. Report all volumes on OGOR B as disposition code 08.
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. Include meter serial number on sundry.
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 from date requested on sundry.
9. Submit Subsequent Report to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).
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.

JAM 111915