

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter a  
abandoned well. Use form 3160-3 (APD) for such proposals.*

**Carlsbad Field Office**  
**OCD Artesia**

<b>SUBMIT IN TRIPLICATE - Other instructions on page 2</b>		7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION	8. Well Name and No. RONCO FEDERAL SWD 1	
2. Name of Operator COG OPERATING LLC Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com	9. API Well No. 30-015-44420-00-X1	
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4332	10. Field and Pool or Exploratory Area SALT WATER DISPOSAL (SWD)
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 19 T17S R30E NENW 600FNL 1650FWL 32.825634 N Lat, 104.014297 W Lon		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 Workover Operations
	<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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

02/08/18 Attempt to retrieve tubing work string, could not get blanking plug to set.  
02/09/18 ? 02/13/18 Killed well. Attempt to release packer, packer did not come out of hole with work string.  
02/14/18 - 03/15/18 Fishing out packer. 03/14/18 Requested mobile lact on location, received RT C-104 approval.  
03/16/18 RIH w/ packer and tubing. Set packer @ 8527. Packer has 2.31 F Nipple on top and 2.25 R Nipple on bottom. RIH w/ 97 jts 2-7/8 L80 tbg. Circ hole w/ 330bbbs packer fluid. Test packer and csg to 600# for 20mins. Received signed contract from ConocoPhillips to sell oil from lact.  
03/20/18 SWI, RDMO.  
04/02/18 Received Flare approval.  
04/03/18 Began flow back operations.  
04/27/18 SI well. WOO.

RECEIVED

MAY 23 2018

GC 5-24-18  
Accepted for record - NMOCD

DISTRICT II-ARTESIA O.C.D.

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #419135 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by PRISCILLA PEREZ on 05/08/2018 (18PP1663SE)**

Name (Printed/Typed) KANICIA CASTILLO	Title PREPARER
Signature (Electronic Submission)	Date 05/07/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title MAY 14 2018	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 BUREAU OF LAND MANAGEMENT	

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.

(Instructions on page 2)

\*\* BLM REVISED \*\*