

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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  
NMNM074935

6 If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

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

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

AUG 12 2008

8 Well Name and No  
ELECTRA FEDERAL 24

2. Name of Operator

COG OPERATING LLC

Contact: KANICIA CARRILLO  
E-Mail: kcarrillo@conchoresources.com

OCD-ARTESIA

API Well No.  
30-015-36272-00-X1

3a. Address

550 W TEXAS, STE 1300 FASKEN TOWER II  
MIDLAND, TX 79701

3b. Phone No. (include area code)

Ph: 432-685-4332

10 Field and Pool, or Exploratory  
LOCO HILLS

4 Location of Well (Footage, Sec, T, R, M, or Survey Description)

Sec 15 T17S R30E NWNW 330FNL 330FWL

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       | Well Spud                                 |
|   | <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.)

07/05/08 Spud 17-1/2" @ 8:15pm. 7/6/08 TD 17-1/2" @ 444'. Ran 10jts 13-3/8 H40 48# @ 444'. Cmt w/ 180sx C, 475sx C. PD @ 1:45pm. Ran temp survey. TOC @ 340' CMT 1" to surface. Cmt w/ 190sx C. Circ 25sx. WOC 18hrs. Tested BOP to 2000# for 10 min, ok.  
07/09/08 TD 11" @ 1625'. Ran 35jts 8-5/8 J55 32# @ 1625'. Cmt w/450sx C, 200sx C. PD @ 3:15pm. Circ 42sx. WOC 12hrs. Test BOP to 2000# for 10 min, ok.  
07/22/08 TD 7-7/8" @ 8107'.  
07/24/08 Ran 198jts 5-1/2 L-80 17# @ 8107'. Cmt w/ 400sx C, 600sx C, 400sx C. PD @ 8:45pm. Circ 298sx. WOC 12hrs. Tested csg to 600# for 20min, ok.  
07/25/08 RR.

**ACCEPTED FOR RECORD**

AUG 12 2008

14. Thereby certify that the foregoing is true and correct

Electronic Submission #62098 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by KURT SIMMONS on 08/08/2008 (08KMS2410SE)

Gerry Guye, Deputy Field Inspector  
District II ARTESIA

Name (Printed/Typed) KANICIA CARRILLO

Title PREPARER

Signature (Electronic Submission)

Date 08/08/2008

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

**ACCEPTED**

JAMES A AMOS  
Title SUPERVISOR EPS

Date 08/09/2008

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 Carlsbad

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