

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTOCD-ARTESIA FORM APPROVED
OMB No. 1004-0137
Expires March 31, 2007

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	OCT 01 2008	5. Lease Serial No. NM-074935
2. Name of Operator COG Operating LLC	OCD-ARTESIA	6. If Indian, Allottee or Tribe Name
3a. Address 550 W. Texas Ave., Suite 1300 Midland, TX 79701	3b. Phone No. (include area code) 432-685-4332	7. If Unit or CA/Agreement, Name and/or No
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330 FNL & 330 FWL SEC. 15, T17S, R30E, UNIT D		8. Well Name and No ELECTRA FEDERAL #24
330 FNL & 2310 FWL SEC. 15, T17S, R30E, UNIT C		9. API Well No. 30-015-36272
		10. Field and Pool, or Exploratory Area JACKSON; ABO
		11. County or Parish, State EDDY, 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 Change field & pool
	<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.)

This location was originally permitted as a 40 acre spacing Loco Hills; Glorieta-Yeso well with TD of 5950'.
COG respectfully requests permission to drill this location as a 80 acre spacing Abo well with a TVD of 7810'.
An updated C-102 will be forwarded as soon as possible. Proposed procedure is as follows:

1. Complete well and drill 2000' lateral in Basal Abo.
2. Set 5-1/2" CIBP @ +/- 7650' above existing perfs 7736' - 7838'.
3. Set cased hole whipstock @ +/- 7500' and mill 4-3/4" exit window in 5-1/2" casing.
4. Drill 4-3/4" hole and kick off at +/- 7530', building curve over +/- 300' to horizontal at 7760' TVD. Drill horizontal section in an easterly direction for +/-2000' lateral to TD at +/-9650' MD, 7810' TVD.
5. Run 2-7/8" 6.5# L80 8rd tubing as production liner in uncemented open hole lateral and set isolation packers with Liner top packer @ +/- 7450'.
6. COG requests a variance to the 200' minimum tie back in order to set the pump as close to the formation as possible. The window and horizontal are all located in the Abo Formation.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Phyllis A. Edwards		Title Regulatory Analyst
Signature <i>Phyllis A. Edwards</i>	Date 09/16/2008	APPROVED
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved by 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.	Title Office	Date SEP 26 2008 WESLEY W. INGRAM PETROLEUM ENGINEER

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)

Accepted for record
NMOCD

DISTRICT I
1220 S. FRENCH DR., BOBBS, NM 88240

DISTRICT II
1301 W. GRAND AVENUE, ARTESIA, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
1220 S. ST. FRANCIS DR., SANTA FE, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised October 12, 2005
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number 30-015-36272	Pool Code 33750	Pool Name Jackson, ABO
Property Code 302483	Property Name ELECTRA FED	Well Number 24
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3688'

Surface Location

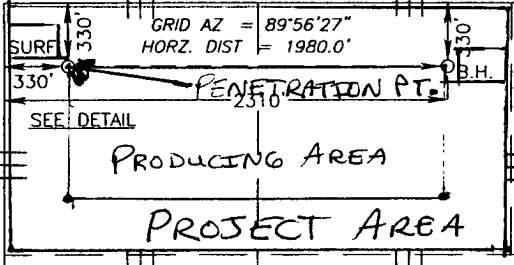
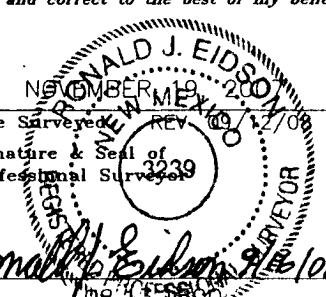
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	15	17-S	30-E		330	NORTH	330	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	15	17-S	30-E		330	NORTH	2310	WEST	EDDY

Dedicated Acres 80	Joint or Infill	Consolidation Code	Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p>BOTTOM HOLE LOCATION</p> <p>Y=669774.6 N X=614561.1 E</p>	<p>OPERATOR CERTIFICATION</p> <p>I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p><i>Phyllis A. Edwards</i> 9-18-08 Signature Date</p> <p>Phyllis A. Edwards Printed Name Regulatory Analyst</p>
<p>DETAIL</p> <p>3691.1' 3698.0' SURF. 600' 3684.2' 3694.6'</p>	<p>GEODETIC COORDINATES NAD 27 NME</p> <p>Y=669772.6 N X=612581.5 E</p> <p>LAT.=32.840753° N LONG.=103.966778° W</p>	<p>SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p> Date Surveyed REV 10/12/08 JC Signature & Seal of Professional Surveyor <i>Ronald J. Eidson</i> 10/12/08</p> <p>Certificate No. GARY EIDSON 12641 RONALD J. EIDSON 3239</p>

**Electra Federal #24
30-015-36272
COG Operating LLC
September 26, 2008
Conditions of Approval**

- 1. Install and test BOP/BOPE – minimum 2M with test to 2000 psi.**
- 2. Minimum liner requirement tie back is 100' above window. Liner seal test not required since window and liner are in the same formation.**
- 3. No cement required on top of CIBP since it is covering perforations in the same formation.**

WWI 092608