Form 3160-5 (April 2004)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA	
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FORM APPROVED OMB NO. 1004-0137 Expires March 31, 2007

5. Lease Serial No.

## NMNM100844

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.

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE -	Other instructions o	n reverse side	<i>y</i> <sup>c</sup>	7. If Unit or CA/A	Agreement, Name and/or No	
1. Type of Well  X Oil Well Gas Well Other  NOV - 6 2008  2. Name of Operator Nearburg Producing Company  3a. Address 3300 N A St., Bldg 2, Ste 120, Midland, TX 79705  432/686-8235				8. Well Name and No. Comet 22 Federal # 2  9. API Well No. 30-015-35818  10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey I 1980 FSL and 330 FWL, Sec 22-16S-28 12. CHECK APPROPRIATE	Ε	ATE NATURE OF N	IOTICE, REP	Crow Flats;  11. County or Pa Eddy  ORT, OR OTHE	rish, State	
TYPE OF SUBMISSION	TYPE OF ACTION					
X Notice of Intent  Subsequent Report  Final Abandonment Notice  13. Describe Proposed or Completed Operation (clearly	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Reclamatio Recomplete Temporaril Water Disp	e X y Abandon <u>O</u> oosal	perator	
testing has been completed. Final Abandonment N determined that the final site is ready for final inspector. NPC requests Change Of Operator of LLC. Please see same attached ap	rtion.) n the subject wel	l. NPC is now th MOCD approved on	ne Operator	instead of C	OG Operating	
00	NOV 5 - 2003 nuye, Deputy Field Insp D-District II ART		NO	PROVE V - 4 2008		
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)  Sarah Jordan		Title Product	CARLSBA tion Analysi	LAND MANAGEN D FIELD OFFICE	MENT	
T Ordan		Date 10:30	0.00			
THIS	SPACE FOR FEDER	RAL OR STATE OFF	ICE USE			
Approved by		Title		Date	<del></del>	
Conditions of approval, if any, are attached. Approval o certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	those rights in the subject	ant or Office lease				

Form 3160-5 (April 2004)

Approved b

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires March 31, 2007

Date

5. Lease Serial No. SUNDRY NOTICES AND REPORTS ON WELLS NMNM100844 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. 7. If Unit or CA/Agreement, Name and/or No. SUBMIT IN TRIPLICATE - Other instructions on reverse side Type of Well 8. Well Name and No X Oil Well Gas Well Comet 22 Federal #1 2. Name of Operator Nearburg Producing Company 9. API Well No. 3a. Address 3b. Phone No. (include area code) 30-015-35832 3300 N A St., Bldg 2, Ste 120, Midland, TX 79705 432/686-8235 10. Field and Pool, or Exploratory Area 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Crow Flats; Wolfcamp 660 FSL and 330 FWL, Sec 22-16S-28E 11. County or Parish, State 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION X Notice of Intent Acidize Deepen Production (Start/Resume) Water Shut-Off Fracture Treat Reclamation Well Integrity Alter Casing Subsequent Report New Construction Other Change of Casing Repair Recomplete Plug and Abandon Change Plans Temporarily Abandon Operator 0 Final Abandonment Notice Convert to Injection Plug Back 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 shall 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 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 final site is ready for final inspection.) NPC requests Change Of Operator on the subject well. NPC is now the Operator instead of COG Operating LLC. Please see same attached approval from the NMOCD approved on 7/31/08. NPC bond # is NMB000153. I hereby certify that the foregoing is true and correct Nafre (Printed/Typed) Title Sàrah Jordan Production Analyst 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.

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes 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.

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

District II 1301 W. Grand Ave., Artesia, NM 88210 Phone:(505) 748-1283 Fax:(505) 748-9720

## State of New Mexico Energy, Minerals and Natural Resources

Form C-145 Permit 79617

Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

(ignut ZZ Fed #7 1 #1

Change of Operator

**New Operator Information Previous Operator Information** 8/1/2008 Effective Date: 15742 229137 OGRID: OGRID: COG OPERATING LLC NEARBURG PRODUCING CO Name: Name: PO BOX 823085 550 W TEXAS Address: Address: **SUITE 1300** Address: Address: MIDLAND, TX 79701 City, State, Zip: DALLAS, TX 75382 City, State, Zip:

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information on this form and the certified list of wells is true to the best of my knowledge and belief.

**New Operator Previous Operator** Signature: Signature Printed Printed Name: Name: Title: Title: Date: Date:

**NMOCD** Approval

Electronic Signature: Carmen Reno, District 2

Date: July 31, 2008