

Form 3160-5
Rev. 2007

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NMOCD ARTESIA

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

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.
NMNM98120

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.
SKELLY UNIT 623

2. Name of Operator

COG OPERATING LLC

Contact: KANICIA CARRILLO

E-Mail: kcarrillo@conchoresources.com

9. API Well No.
30-015-36833-00-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
FREN

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

Sec 14 T17S R31E NENW 330FNL 2150FWL
32.84096 N Lat, 103.84194 W Lon

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

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <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 | Drilling Operations |
| <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.)

2/19/10 Test 5-1/2 csg 4500psi for 30min, ok. Perf Lower Blinbry @ 6758 - 6540 w/ 1 SPF, 26 holes.

2/22/10 Acidize w/2,500 gals acid. Frac w/124,000 gals gel, 144,442# 16/30 White sand, 32,004# 16/30 Siberprop sand. Set comp plug @ 6300. Perf Middle Blinbry @ 6070 - 6270 w/1 SPF, 26 holes.
Acidize w/2,500 gals acid. Frac w/ 125,000 gals gel, 148,166# 16/30 White sand, 30,097# 16/30 Siberprop sand. Set comp plug @ 6030. Perf Upper Blinbry @ 5800 - 6000 w/ 1 SPF, 26 holes.
Acidize w/2,500 gals acid. Frac w/ 124,000 gals gel, 144,250# 16/30 White sand, 30,679# 16/30 Siberprop sand. Set comp plug @ 5420. Perf Paddock @ 5270 - 5390 w/1 SPF, 18 holes. Acidize w/3,000 gals acid. Frac w/ 100,000 gals gel, 100,041# 16/30 White sand, 7,866# 16/30 Siberprop sand.
2/25/10 Drill out plugs. Clean out to PBTD 6789.
2/26/10 RIH w/ 193jts 2-7/8" 6.5# J55 tbg, SN @ 6261'.
3/01/10 RIH w/ 2-1/2"x2"x24" pump. Hang on well.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #83899 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by KURT SIMMONS on 03/31/2010 (10KMS1034SE)

Name (Printed/Typed) KANICIA CARRILLO

Title PREPARER

Signature (Electronic Submission)

Date 03/31/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

JAMES A AMOS
Title SUPERVISOR EPS

Date 04/03/20

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.

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