

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

APR 12 2010

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.  
NMCD ARTESIA 028936D

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: UNKNOWN OTH8. Well Name and No.  
LOCO HILLS SWD 33 42. Name of Operator  
COG OPERATING LLCContact: KANICIA CARRILLO  
E-Mail: kcarrillo@conchoresources.com9. API Well No.  
30-015-372693a. Address  
550 WEST TEXAS AVE STE 1300  
MIDLAND, TX 797013b. Phone No. (include area code)  
Ph: 432-685-433210. Field and Pool, or Exploratory  
SWD;WOLFCAMP

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

Sec 33 T17S R30E 840FSL 660FEL  
32.47098 N Lat, 103.58139 W Lon11. 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       | 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.)

SWD

3/03/10 Test BOP to 2000psi for 30min, ok.

3/05/10 Perf Lower Wolfcamp @ 9170 - 9250 w/ 2 SPF, 160 holes, 8950 - 9152 w/ 1 SPF, 202 holes.

3/08/10 RIH w/ 7" packer @ 8855. Acidize via tubing w/7,500 gals acid.

3/10/10 CBP @ 8940. Perf Upper Wolfcamp @ 8540 - 8700 w/1 SPF, 320 holes, 8800 - 8900 w/1 SPF, 200 holes.

3/11/10 RIH w/ 7" packer @ 8440. Acidize via tubig w/7,500 gals acid. Release packer.

3/16/10 Drill out plug. PBTD @ 9635.

3/26/10 Frac w/115,000 gals 15% acid, 60,000 gals gel, 30,000# Rock salt. Flush w/ 450bbls fresh water.

4/01/10 RIH w/ 269jts 3-1/2" 9.3# L80 tbg, EOT @ 8481. Packer @ 8467. ON/off tool @ 8464. Pump packer fluid, latch on/off tool, ND BOP, NU wellhead. Test csg to 700psi for 30min, ok.

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

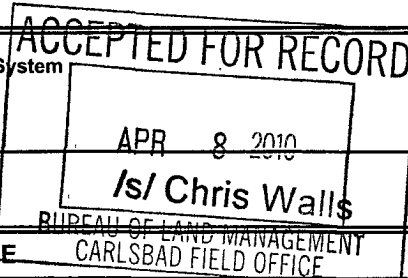
Electronic Submission #84010 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad

Name (Printed/Typed) KANICIA CARRILLO

Title PREPARER

Signature (Electronic Submission)

Date 04/01/2010



THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

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

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.

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

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