

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.
NMNM43565

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. SQUINTS FEDERAL COM 8H
2. Name of Operator COG PRODUCTION LLC		9. API Well No. 30-025-43168-00-X1
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		10. Field and Pool or Exploratory Area OJO CHISO
3b. Phone No. (include area code) Ph: 575-748-6940		11. County or Parish, State LEA COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 27 T22S R34E SWSW 220FSL 690FWL		

12. CHECK THE 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"/> Hydraulic Fracturing	<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 type="checkbox"/> Other
	<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 checked="" 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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Required information for disposal water:

- 1) Name of formation producing water on lease: Bone Spring
- 2) Amount of water producing in barrels per day: 5000 bwpd
- 3) How water is stored on lease: 2-750 BBL Fiberglass tank
- 4) How water is moved to disposal: Piped/Trucked to nearest SWD System.

5) Disposal Facility #1

a) Facility Operator Name: Owl SWD Operating, LLC
Water leaves COG well pad and is piped to an Owl SWD via trunk line.

Disposal Facility #2

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #527247 verified by the BLM Well Information System For COG PRODUCTION LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 08/25/2020 (20PP3439SE)	
Name (Printed/Typed) AMANDA AVERY	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 08/25/2020

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By ACCEPTED	DEBORAH MCKINNEY Title LEGAL INSTRUMENTS EXAMINER	Date 08/25/2020
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 Hobbs

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)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #527247 that would not fit on the form

32. Additional remarks, continued

a) Facility Operator Name: Solaris Water Midstream, LLC
Water leaves COG well pad and is piped to a Solaris SWD via trunk line.

Disposal Facility #3

a) Facility Operator Name: Goodnight Midstream Permian, LLC
Water leaves COG well pad and is piped to a Goodnight SWD via trunk line.

In the event a temporary change of method or location of disposal is necessary, produced water will be trucked to an authorized disposal well in the geographic vicinity.

Revisions to Operator-Submitted EC Data for Sundry Notice #527247

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	DISPOSE NOI	DISPOSE NOI
Lease:	NMNM43565	NMNM43565
Agreement:		
Operator:	COG OPERATING LLC 2208 W MAIN STREET ARTESIA, NM 88210 Ph: 575-748-6940	COG PRODUCTION LLC 2208 W MAIN STREET ARTESIA, NM 88210 Ph: 575.748.6940
Admin Contact:	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com Ph: 575-748-6940	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com Ph: 575-748-6940
Tech Contact:	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com Ph: 575-748-6940	AMANDA AVERY REGULATORY ANALYST E-Mail: aavery@concho.com Ph: 575-748-6940
Location:		
State:	NM	NM
County:	LEA	LEA
Field/Pool:	OJO CHISO; BONE SPRING	OJO CHISO
Well/Facility:	SQUINTS FEDERAL COM 8H Sec 27 T22S R34E Mer NMP SWSW 220FSL 690FWL 32.356026 N Lat, 103.464247 W Lon	SQUINTS FEDERAL COM 8H Sec 27 T22S R34E SWSW 220FSL 690FWL