

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

OCD Hobbs

HOBBS OCD

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

MAY 19 2014

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM120908
2. Name of Operator COG PRODUCTION LLC		6. If Indian, Allottee or Tribe Name
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 575-748-6945		8. Well Name and No. KING TUT FEDERAL 4H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 30 T24S R32E NENE 190FNL 330FEL 32.194995 N Lat, 103.705821 W Lon		9. API Well No. 30-025-41560-00-X1
		10. Field and Pool, or Exploratory COTTON DRAW
		11. County or Parish, and State LEA COUNTY, 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 Onshore Order Variance
	<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 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 site is ready for final inspection.)

COG Production LLC respectfully requests approval to add a Flex Hose Variance Report to the original approved APD.

Flex Hose Variance attached.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #245096 verified by the BLM Well Information System For COG PRODUCTION LLC, sent to the Hobbs Committed to AFMSS for processing by CHRISTOPHER WALLS on 05/09/2014 (14CRW0179SE)	
Name (Printed/Typed) MAYTE X REYES	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 05/09/2014

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By CHRISTOPHER WALLS	Title PETROLEUM ENGINEER	Date 05/09/2014
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.

\*\* BLM REVISED \*\*

MJB/ocd 5/19/2014

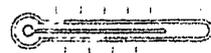
MAY 19 2014

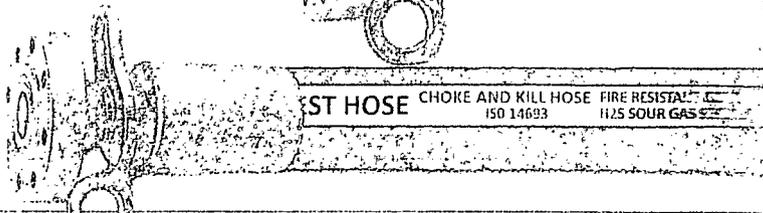
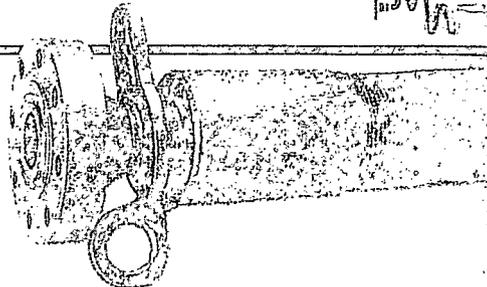
# Choke & Kill, BOP

## Choke & Kill, BOP

## MW Choke & Kill

Designed as a flexible connection to the choke manifold.  
 Tube: petroleum resistant for oil based drilling fluids  
 Cover: ozone, petroleum, and abrasion resistant  
 Reinforcement: high tensile steel wire spiral layers  
 Thermal Blanket: 1500° continuous ratings,  
 non-flammable, non-conductive  
 Armor Wall: .144"  
 Max Length: 150 feet

 -20° F / +212° F  
 -29° C / +100° C



ST HOSE CHOKES AND KILL HOSE FIRE RESISTANT ISO 14693 1125 SOUR GAS

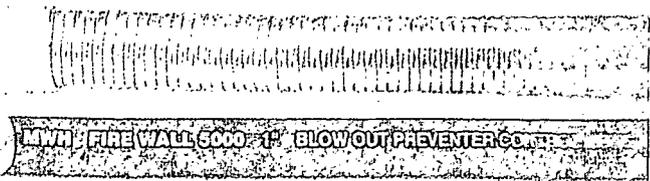
- Rotary hose
- Hydraulic hose
- Hammer Unions
- Industrial hose
- Fire hose
- Metal hose, Expansion Joints
- Ducting hose
- Automotive hose
- Crimp Fittings & Machines
- Frac Fittings, Notched KCs
- Flam & Groove, Universal, Shank Fittings
- Valves
- Black Pipe
- Quick Couplings
- Gauges
- Belts, Sheaves, & Bushings
- Steel Adapters
- Brass Adapters

Item	ID inch	OD inch	WP psi	Test psi	Weight
CK-48 Red	3	4.94	5,000	10,000	11.1
CK-56 Red	3½	5.44			11.1
CK-64 Red	4	6.31			23.2
CK-48 Armor	3	6.5			11.1
CK-56 Armor	3½	7	10,000	15,000	23.2
CK-64 Armor	4	8			23.2
CK-4810K Red	3	5.31			23.2
CK-5610K Red	3½	5.81			23.2
CK-6410K Red	4	4.75	10,000	15,000	33.2
CK-4810K Armor	3	6.5			33.2
CK-5610K Armor	3½	7			33.2
CK-6410K Armor	4	8			33.2

## MW BOP Control Line

For blowout preventer lines.  
 Tube: for hydraulic BOP actuation  
 Thermal Blanket: 1500° continuous rating,  
 non-flammable, non-conductive  
 Armor Wall: .08"  
 Popular with a larger hex and longer threads for easier installation of hammer unions.

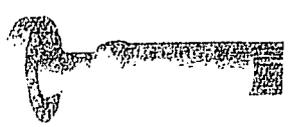
 -20° F / +212° F  
 -29° C / +100° C



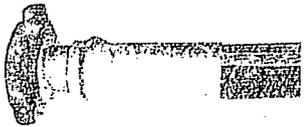
MW FIRE WALL 5000-11 BLOWOUT PREVENTER

Item	ID inch	OD inch	WP psi	Test psi	Weight
BOP-16 Armor	1	2.06	5,000	10,000	11.1
BOP-32 Armor	2	3.75			11.1
BOP-16	1	1.77			23.2
BOP-32	2	3.09			23.2

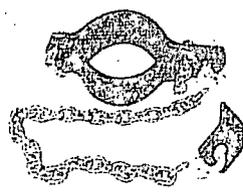
Carbon or stainless steel nipples are available and 1/2", 3/4", 1-1/4", and 1-1/2" sizes are available



Weld-on Flanges or Hammer Unions



Integral 1002/1502 Hammer Union Fittings



Safety Clamps



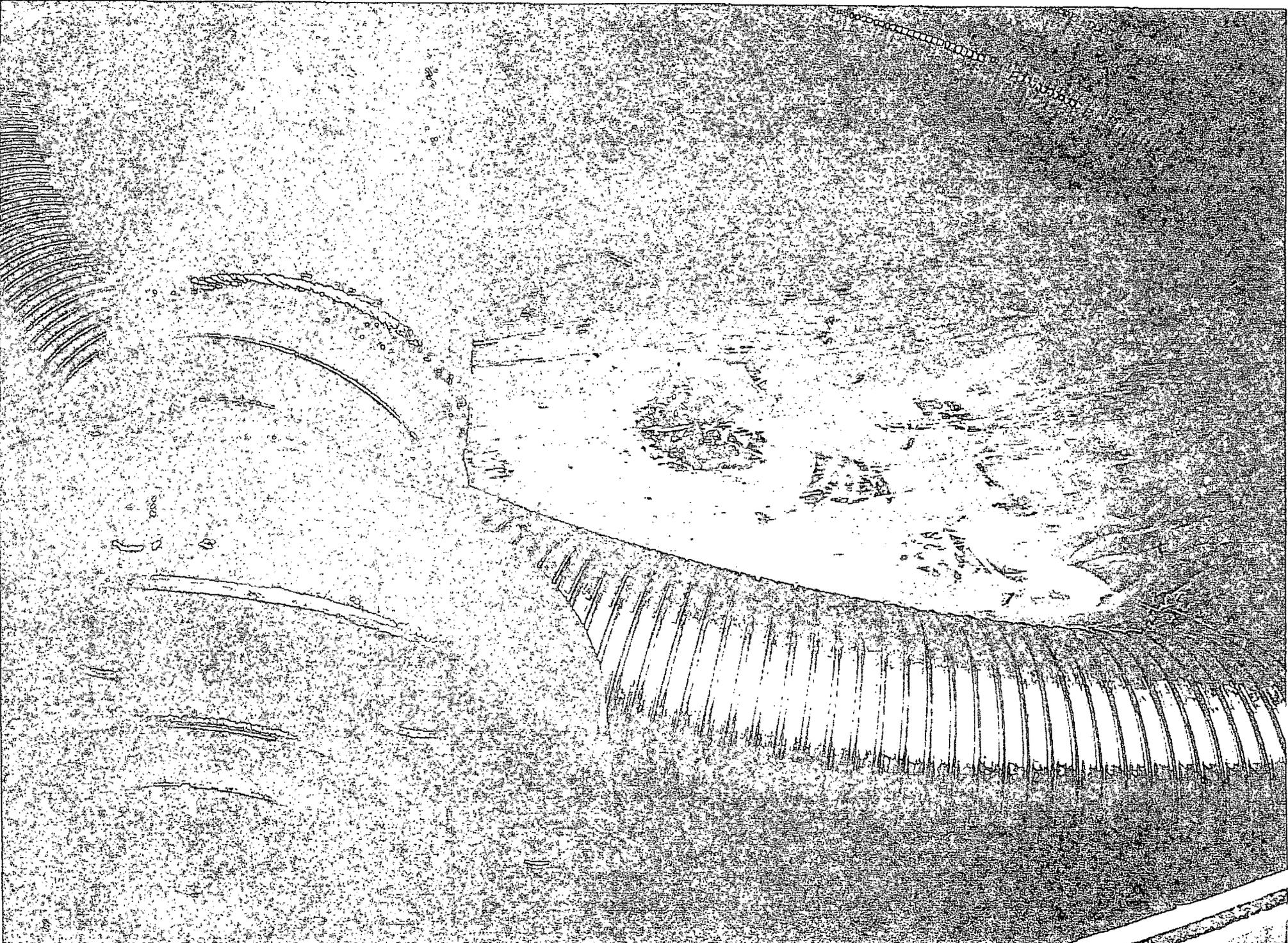
Fire Proof Quick Connects



Fire Clamp



237720



Co-Flex line  
Conditions of Approval

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).