

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.

SUBMIT IN TRIPLICATE - Other instructions on page 2

OCB Hobbs
HOBBS OCB
MAY 24 2019
RECEIVED

| | | | |
|---|--|---|--|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. NMNM120907 ✓ | |
| 2. Name of Operator COG OPERATING LLC | | 6. If Indian, Allottee or Tribe Name | |
| 3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 | | 7. If Unit or CA/Agreement, Name and/or No. | |
| 3b. Phone No. (include area code) Ph: 575-748-6940 | | 8. Well Name and No. EIDER FEDERAL 202H | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T24S R32E SWSW 210FSL 1080FWL 32.167393 N Lat, 103.650496 W Lon | | 9. API Well No. 30-025-44627-00-X1 | |
| | | 10. Field and Pool or Exploratory Area WC025G08S253235G-LWR BONE SPF | |
| | | 11. County or Parish, State LEA COUNTY, NM | |

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 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 must 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 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: 500 bwpd ✓
- 3) How water is stored on lease: 2-500 BBL Fiberglass tank ✓
- 4) How water is moved to disposal: Piped to nearest SWD System. ✓
- 5) Disposal Facility #1
 - a) Facility Operator Name: COG Operating LLC
 - b) Name of facility or well name & number: Gold Coast 26 Federal SWD #1 (SWD-1391) ✓
 - c) Type of facility or well: WDW
 - d) Location by 1/4, 1/4, Sec, T & R: NESW, Sec 26-T24S-R32E
 - e) 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.

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

**Electronic Submission #462710 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs
Committed to AFMSS for processing by PAMELA HERNANDEZ on 04/24/2019 (19PGH0010SE)**

| | |
|--|--|
| Name (Printed/Typed) AMANDA AVERY | Title AUTHORIZED REPRESENTATIVE |
| Signature (Electronic Submission) | Date 04/24/2019 |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

| | | | |
|---|--------------|--|------------|
| Approved By _____ | Title _____ | <div style="border: 2px solid black; padding: 5px; display: inline-block;"> ACCEPTED FOR RECORD APR 24 2019 <i>[Signature]</i> </div> | 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.

(Instructions on page 2) **** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

KZ

Revisions to Operator-Submitted EC Data for Sundry Notice #462710

| | Operator Submitted | BLM Revised (AFMSS) |
|----------------|---|--|
| Sundry Type: | DISPOSE NOI | DISPOSE NOI |
| Lease: | NMNM120907 | NMNM120907 |
| Agreement: | | |
| Operator: | COG OPERATING LLC 2208 W MAIN STREET ARTESIA, NM 88210 Ph: 575-748-6940 | COG OPERATING LLC ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 Ph: 432.685.4342 |
| Admin Contact: | AMANDA AVERY AUTHORIZED REPRESENTATIVE E-Mail: aavery@concho.com Ph: 575-748-6940 | AMANDA AVERY AUTHORIZED REPRESENTATIVE E-Mail: aavery@concho.com Ph: 575-748-6940 |
| Tech Contact: | AMANDA AVERY AUTHORIZED REPRESENTATIVE E-Mail: aavery@concho.com Ph: 575-748-6940 | AMANDA AVERY AUTHORIZED REPRESENTATIVE E-Mail: aavery@concho.com Ph: 575-748-6940 |
| Location: | | |
| State: | NM | NM |
| County: | LEA | LEA |
| Field/Pool: | WILDCAT; BONE SPRING | WC025G08S253235G-LWR BONE SPR |
| Well/Facility: | EIDER FEDERAL 202H Sec 35 T24S R32E Mer NMP SWSW 210FSL 1080FWL 32.173930 N Lat, 103.650496 W Lon | EIDER FEDERAL 202H Sec 35 T24S R32E SWSW 210FSL 1080FWL 32.167393 N Lat, 103.650496 W Lon |