

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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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.**

<b>SUBMIT IN TRIPLICATE - Other instructions on reverse side.</b>		5. Lease Serial No. NMLC029405A
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator COG OPERATING LLC		7. If Unit or CA/Agreement, Name and/or No.
Contact: KANICIA CARRILLO E-Mail: kcarrillo@conchoresources.com		8. Well Name and No. BC FEDERAL 18
3a. Address 550 W TEXAS AVE SUITE 1300 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4332	9. API Well No. 30-025-38725-00-S1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 19 T17S R32E NWNW Lot D 642FNL 742FWL 32.82563 N Lat, 103.81211 W Lon		10. Field and Pool, or Exploratory MALJAMAR ; Yeso
		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 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 recomplate 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.)

12/31/09 Test 5-1/2 csg 5000psi, ok.

01/02/10 Perf Lower Blinbry @ 6450-6650 w/ 1 SPF, 29 holes. Acidize w/2,500 gals acid. Frac w/124,187 gals gel, 146,957# 16/30 Ottawa sand, 31,501# 16/30 Siberprop. Set comp plug @ 6410. Perf Middle Blinbry @ 6180-6380 w/1 SPF, 26 holes. Acidize w/2,500 gals acid. Frac w/123,786 gals gel, 145,080# 16/30 Ottawa Sand, 30,310# 16/30 Siberprop. Set comp plug @ 6140. Perf Upper Blinbry @ 5910-6099 w/ 1 SPF, 26 holes. Acidize w/2,500 gals acid. Frac w/ 124,287 gals gel, 148,210# 16/30 Ottawa sand, 31,278# 16/30 Siberprop. Set comp plug @ 5500. Perf Paddock @ 5346-5470 w/1 SPF, 18 holes. Acidize w/3,000 gals acid. Frac w/104,834 gals gel, 105,980 Ottawa Sand, 13,048# 16/30 Siberprop.

01/11/10 Drill out plugs. Clean out to PBDT 7090.

01/12/10 RIH w/198jts 2-7/8" 6.5" J55 tbg, SN @ 6437. RIH w/ 2-1/2"x2"x24" pump.

01/13/10 Hang on well.

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

Electronic Submission #81882 verified by the BLM Well Information System

For COG OPERATING LLC, sent to the Hobbs

Committed to AFMSS for processing by CHERYLE RYAN on 02/25/2010 (10CMR0094SE)

Name (Printed/Typed) KANICIA CARRILLO

Title PREPARER

Signature (Electronic Submission)

Date 02/24/2010

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

JAMES A AMOS  
Title SUPERVISOR EPS

Date 03/07/20

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 Hobbs

KZ

2010

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 \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***