Form 3160-5 (August 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD- Artesia FORM APPROVED OMB NO 1004-0135

Expires: July 31, 2010

5. Lease Serial No. NMNM0397623

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7	If Indian	Allattas on Triba Nama	

## **SUNDRY NOTICES AND REPORTS ON WELLS** Do not use this form for proposals to drill or to re-enter an

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SUBMIT IN TRI	7. If Unit or CA/Agre	7. If Unit or CA/Agreement, Name and/or No.				
I. Type of Well  ☐ Gas Well ☐ Oth	ner		8. Well Name and No. FOLK FEDERAL 33			
Name of Operator     COG OPERATING LLC		BYN ODOM oresources.com				
3a. Address 550 WEST TEXAS AVENUE : MIDLAND, TX 79701	SUITE 1300	Phone No. (include area code n: 432-685-4385	e) 10. Field and Pool, o EMPIRE	10. Field and Pool, or Exploratory EMPIRE		
4. Location of Well (Footage, Sec., 7	., R., M., or Survey Description)		11. County or Parish	11. County or Parish, and State		
Sec 17 T17S R29E SENE Lot	H 1650FNL 330FEL	1	EDDY COUNT	EDDY COUNTY, NM		
12. CHECK APPI	ROPRIATE BOX(ES) TO IN	IDICATE NATURE OF	NOTICE, REPORT, OR OTHE	ER DATA		
TYPE OF SUBMISSION	TYPE OF SUBMISSION TYPE OF ACTION					
- Notice of Intent	☐ Acidize	Deepen	Production (Start/Resume)	☐ Water Shut-Off		
Notice of Intent	Alter Casing	Fracture Treat	☐ Reclamation	☐ Well Integrity		
☐ Subsequent Report	☐ Casing Repair	New Construction	Recomplete	Other		
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	☐ Temporarily Abandon	Change to Original A PD		
	Convert to Injection	□ Plug Back	■ Water Disposal			
determined that the site is ready for f We encountered a water flow COG Operating respectfully re COG Operating respectfully re 1st stage: 550sxs 50:50:2, 5% cuft/sack. 2nd stage: Lead 550sxs 50:50 Tail 300sxs Class C mixed at	at 2275'.  equests permission to run a E equests permission to run the Salt 3pps LCM .6%SMS 1% D:2, 5% Salt 3pps LCM .6%SI 16.8ppg, yeild 0.99 cuft/sack	Acces  OV Tool @ 2600'.  Production cement as for the second seco	epted for record - NMOCD 6- 22-1)  billows: 6 CF, yield 1.34 125pps CF. yield 1.34	And the operator has		
14. Thereby certify that the foregoing is	Electronic Submission #1069	987 verified by the BLM We	ell Information System			
	nmitted to AFMSS for processi	ng by KURT SIMMONS on	04/25/2011 (11KMS1453SE)			
Name(Printed/Typed) ROBYN C	ООМ	Title PERSO	ON RESPONSIBLE			
Signature (Electronic S	Submission)	Date 04/25/2	2011			
	THIS SPACE FOR I	FEDERAL OR STATE	OFFICE USE			
Approved By ACCEPT	ED	JAMES A <sub>Title</sub> SUPERVI	AMOS SOR EPS	Date 06/05/2011		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to condu	uitable title to those rights in the sub		ad			
Title 18 U.S.C. Section 1001 and Title 43	U.S.C. Section 1212 make it a crin	ne for any person knowingly an	nd 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.