Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-Actisia
FORM APPROVED
OMB NO. 1004-0135
Evnires: July 31 2010

OMB NO. 1004-013: Expires July 31, 2010 5. Lease Serial No.

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

6 If Indian Allottes or Triba Nam

NMLC028784A

abandoned wel	6. If Indian, Allottee	6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRI		7 If Unit or CA/Agreement, Name and/or No. NMNM88525X			
1. Type of Well		8. Well Name and No. BURCH KEELY UNIT 413			
2. Name of Operator	9. API Well No.				
COG OPERATING LLC	A AARON esources.com		30-015-36209-00-S1		
3a. Address 550 WEST TEXAS AVENUE S MIDLAND, TX 79701	SUITE 1300 Ph: 4	hone No (include area code 432-818-2319 32-685-4396) 10. Field and Pool, of GRAYBURG J UNKNOWN	10. Field and Pool, or Exploratory GRAYBURG JACKSON SR-Q-GRBG- UNKNOWN	
4. Location of Well (Footage, Sec., T	., R., M., or Survey Description)		11. County or Parish	, and State	
Sec 24 T17S R29E SESE 25F 32.812876 N Lat, 104.020308	EDDY COUNT	EDDY COUNTY, NM			
12. CHECK APPI	ROPRIATE BOX(ES) TO INDI	CATE NATURE OF	NOTICE, REPORT, OR OTHE	ER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	□ Acidize	Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off	
J	☐ 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		
	☐ Convert to Injection	□ Plug Back	■ Water Disposal		
determined that the site is ready for function Reclamation complete Downsized: 80'on South side & 50'on West side Ready for inspection.	FREC	CEIVED 2 0 2011 CD ARTESIA			
H 7/21/2011	Accepted for record NMOCD				
14 Thereby certify that the foregoing is Con Name (Printed/Typed) NETHA A	Electronic Submission #108490 For COG OPERAT nmitted to AFMSS for processing	FING LILC, sent to the C by KURT SIMMONS on	arlsbad		
Name (17 mew 19peu) NETHA A	ARON	THE AUTHO	DRIZED REPRESENTATIVE	<u> </u>	
Signature (Electronic	Submission)	Date 05/17/2	2011		
	THIS SPACE FOR FE	DERAL OR STATE	OFFICE USE		
Approved By ACCEPT	ED	JAMES A TitleSUPERVI		Date 07/16/2011	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conditions.	uitable title to those rights in the subject uct operations thereon	Office Carlsba			
Title 18 U S C. Section 1001 and Title 43 States any false, fictitious or fraudulent				or agency of the United	