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

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

Lease Serial No NMLC028731B 6. If Indian, Allottee or Tribe Name

abandoned wei					
SUBMIT IN TRII	7. If Unit or CA/Agre NMNM111789)	7. If Unit or CA/Agreement, Name and/or No. NMNM111789X			
1 Type of Well ☐ Gas Well ☐ Oth	8. Well Name and No DODD FEDERA				
2 Name of Operator		THA AARON	9. API Well No		
COG OPERATING LLC	E-Mail: oaaron@conch	noresources.com	30-015-36265-	00-S1	
3a Address 550 WEST TEXAS AVENUES MIDLAND, TX 79701	SUITE 1300 PI	. Phone No (include area code n: 432-818-2319 k: 432-685-4396		10. Field and Pool, or Exploratory GRAYBURG JACKSON	
4 Location of Well (Footage, Sec., T	, R., M., or Survey Description)		11. County or Parish,	11. County or Parish, and State	
Sec 10 T17S R29E SESE 330 32.842824 N Lat, 104.058477			EDDY COUNT	Y, NM	
12. CHECK APPI	ROPRIATE BOX(ES) TO IN	DICATE 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	
_	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		
testing has been completed. Final Aldetermined that the site is ready for function Reclamation completed. To on South side & 70 on West side. Ready for inspection.	inal inspection.)	nly after all requirements, inclu bied for record NMOCD	RECEIVE JUL 2 0 20 NMOCD ART		
14. Thereby certify that the foregoing is	Electronic Submission #1084	488 verified by the BLM We	ell Information System		
Con	For COG OPEI nmitted to AFMSS for process	RATING LLC, sent to the C ing by KURT SIMMONS on	arlsbad 05/17/2011 (11KMS1678SE)		
Name (Printed/Typed) NETHA A	ARON	Title AUTH(Title AUTHORIZED REPRESENTATIVE		
Signature (Electronic	Submission)	Date 05/17/2	2011		
	THIS SPACE FOR	FEDERAL OR STATE	OFFICE USE		
Approved By ACCEPTED		JAMES A _{Title} SUPERV		Date 07/18/201	
Conditions of approval, if any, are attache certify that the applicant holds legal or eq which would entitle the applicant to cond	untable title to those rights in the sul		ad		
Fitle 19 II S.C. Section 1001 and Title 43	U.S.C. Section 1212 make it a cris	me for any person knowingly of	ad wellfully to make to any department	or ogonov of the United	

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction