

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires January 31, 2004**RECEIVED**
JUL 31 2012
NMOCD ARTESIA

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 reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

COG OPERATING LLC

3a. Address

550 W. TEXAS AVE., SUITE 100, MIDLAND, TEXAS 79701

3b. Phone No. (include area code)

432.818.2281

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

UNIT LETTER D

660' ENL & 660' FWL

SEC. 15, T-16S, R-29E

5. Lease Serial No.

NMLC068677

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

DAVIS FEDERAL #003

9. API Well No.

30-015-02727

10. Field and Pool, or Exploratory Area

HIGH LONESOME; QUEEN

11. County or Parish, State

EDDY COUNTY NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Change Plans | <input checked="" type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| <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 recompleate 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 final site is ready for final inspection.)

06/29/12: TUBING SET 5-1/2" CIBP @ 1,850'; CIRC. WELL W/ PXA MUD; PUMP A 25 SX. CMT. PLUG @ 1,850'; WOC.

07/01/12: TAG TOP OF CMT. PLUG @ 1,765'; MIX X PUMP A 10 SX. CMT. PLUG @ 1,765'-1,85' (CALC.) (PER BLM); PERF. X SQZ. A 40 SX. CMT. PLUG @ 1,255'-1,145' (CALC.); PERF. X SQZ. AN 85 SX. CMT. PLUG @ 1,000'; WOC.

07/02/12: TAG TOP OF CMT. PLUG @ 678'; PERF. X SQZ. A 40 SX. CMT. PLUG @ 450'; WOC - DID NOT TAG CMT. PLUG; MIX X RE-SQZ. A 40 SX. CMT. PLUG @ 450'; WOC.

07/03/12: TAG TOP OF CMT. PLUG @ 338'; MIX X PUMP A 5 SX. CMT. PLUG @ 338'-298' (CALC.) (PER BLM); PERF. X CIRC. TO SURF. AN 80 SX. CMT. PLUG @ 63'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; CMT. HAD FALLEN; MIX X PUMP 20 SX. CMT., FILLING ALL ANNULI TO SURF.; WOC TO DRY VERIFYING CMT. TO SURFACE.

07/05/12: BLM VERIFIED ALL CMT. TO SURF.; WELD ON STEEL PLATE TO CASINGS X INSTALL DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 07/05/12.

RECLAMATION
DUE 1-1-13Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.

14. I hereby certify that the foregoing is true and correct
-
- Name (Printed/Typed)

DAVID A. EYLER

Title

AGENT

Date 07/12/12

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

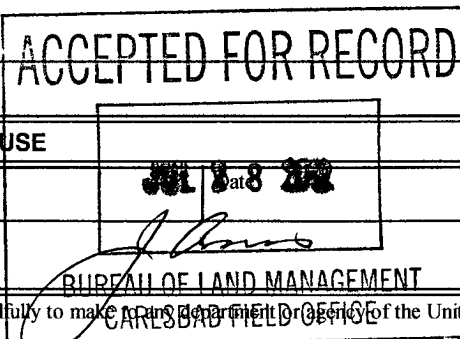
Approved by

Title

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, makes it a crime for any person knowingly and willfully to make a false statement or representation or to use a false statement or representation in its submission.

Accepted for record
NMOCD

A 8/1/2012