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	ATES HE INTERIOR ANAGEMENT			FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010			
	EPORTS ON WELLS			5. Lease Serial No. NMLC068677			
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, Allottee or Tribe Name		
SUBMIT IN TRI	PLICATE - Other ir	structions on rev	structions on reverse side.			7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well Gas Well Other					8. Well Name and No. DAVIS FEDERAL 6		
2. Name of Operator COG OPERATING LLC	RINO		9. API Well No. 30-015-02733-00-S1				
3a. Address ONE CONCHO CENTER 600 MIDLAND, TX 79701				10. Field and Pool, or Exploratory HIGH LONESOME			
4. Location of Well (Footage, Sec., 7	cription)			11. County or Parish, and State			
Sec 15 T16S R29E NENW 66				EDDY COUNTY, NM			
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12. CHECK APPI	ROPRIATE BOX(E	S) TO INDICATE	NATURE OF N	NOTICE, RE	PORT, OR OTHEF	R DATA	
TYPE OF SUBMISSION		TYPE OF ACTION					
□ Notice of Intent	□ Acidize		ben _	Production	on (Start/Resume)	□ Water Shut-Off	
	□ Alter Casing		ture Treat	Reclamat	ion	□ Well Integrity	
□ Subsequent Report	Casing Repair	□ ^{New}	Construction	Recompl	ete	□ ^{Other}	
Final Abandonment Notice	Change Plans	D Plug	and Abandon	□ ^{Tempora}	rily Abandon	· ·	
		jection DPlug Back Water		U Water Di	sposal	•	
testing has been completed. Final Al determined that the site is ready for f Removed well head, anchors, marker. Removed caliche and contam added 1-2 ft clean topsoil as r Leveled and contoured surrou Rip and seed disturbed area w Job completed 10/15/12	inal inspection.) , flowline, and all oth ninated soil from loc needed unding area	ner debris from loca ation and access ro nix.	tion, installed dr	ry hole	RECEIVI JAN 15 20 NMOCD ARTI	ED 13	
14. I hereby certify that the foregoing is	s true and correct.	<u> </u>	t-7-8-1	2			
	Electronic Submis	sion #156660 verifie COG OPERATING LI	d by the BLM We C_sent to the Ca	II Information	System _		
	nmitted to AFMSS fo	r processing by KU	T SIMMONS on	10/29/2012 (13	KMS3663SE)		
Name (Printed/Typed) BRIAN M	AIORINO	· .	Title AUTHO	RIZED REPI	RESENTATIVE		
Signature (Electronic		Date 10/29/2	2012		· ·		
	THIS SPAC	CE FOR FEDERA	L OR STATE	OFFICE US	E		
APProved By ACCEPTED			JAMES A TitleSUPERVIS			Date 01/13/2013	
Conditions of approval, if any, are attached. Approval of this not certify that the applicant holds legal or equitable title to those right which would entitle the applicant to conduct operations thereon.			Office Carlsba	d	· · · · · · · · · · · · ·	······	
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, m statements or representa	nake it a crime for any p tions as to any matter w	erson knowingly and ithin its jurisdiction	d willfully to ma	ke to any department or	agency of the United	
** BLM REVISED **							
At 1/16/2013		Accepted for record					

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