

LOC

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 abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC029020M
2. Name of Operator COG OPERATING LLC Contact: ROBYN ODOM E-Mail: rododom@concho.com		6. If Indian, Allottee or Tribe Name
3a. Address ONE CONCHO CENTER 600 W. ILLINOIS AVE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4385	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 3 T17S R30E 330FNL 330FEL		8. Well Name and No. CARMEN 3 FEDERAL COM 15H
		9. API Well No. 30-015-40539
		10. Field and Pool, or Exploratory LOCO HILLS; GLORIETA-YESO
		11. County or Parish, and State EDDY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Change to Original A PD
	<input type="checkbox"/> Change Plans	<input 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	

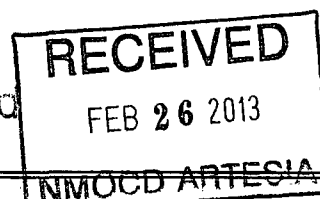
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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 site is ready for final inspection.)

COG Operating LLC respectfully requests permission to eliminate the pilot hole originally requested in the permit for this well. The production hole will be drilled as follows:

Drill 8 3/4" hole and kick off at +/-5279', building curve over +/-827' to horizontal at 5800' TVD.  
Drill 7 7/8" lateral section in a Westerly direction for +/-4092' lateral to TD at +/-10,198' MD,  
5729' TVD. Run 7" x 5 1/2" production casing. 7" to be run from surface to kickoff point and  
changed over to 5 1/2" with DV Tool and ECP at kickoff point. 5 1/2" casing will be run from from  
kickoff point to TD and isolation packers set throughout lateral. 7" to be cemented from kickoff  
point to surface.

All other components of the drill plan will remain the same.

Accepted for record  
2/27/2013 NMOC



14. I hereby certify that the foregoing is true and correct.

Electronic Submission #197393 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by KURT SIMMONS on 02/12/2013 ()

Name (Printed/Typed) ROBYN ODOM

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 02/07/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____		Title _____	Date _____
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 _____	APPROVED FEB 25 2013 Is/ Chris Walla
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any Department of the Interior of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.			

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*