UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

5. Lease Serial No. NMLC028793A

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.				it indian, Allottee of	r Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No. NMNM88525X		
1. Type of Well				8. Well Name and No. BURCH KEELY UNIT 585		
2. Name of Operator Contact: KANICIA CASTILLO				9. API Well No.		
COG OPERATING LLC E-Mail: kcastillo@concho.com				30-015-40274		
3a. Address 600 WEST ILLINOIS AVE MIDLAND, TX 79701	Phone No. (include area code) a: 432-685-4332		10. Field and Pool, or Exploratory BK;GLORIETA-UPPER YESO			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, and State		
Sec 18 T17S R30E Mer NMP 505FSL 2493FEL				EDDY COUNTY, NM		
12. CHECK APPR	ROPRIATE BOX(ES) TO IN	DICATE NATURE OF N	NOTICE, REPO	RT, OR OTHER	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize	□ Deepen	☐ Production (S	Start/Resume)	■ Water Shut-Off	
_	☐ Alter Casing	☐ Fracture Treat	Reclamation		■ Well Integrity	
Subsequent Report	☐ Casing Repair			Recomplete		
☐ Final Abandonment Notice	☐ Change Plans	— <u>-</u> .		☐ Temporarily Abandon		
	Convert to Injection Plug Back		Water Dispo	Water Disposal		
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.) Interim Reclamation complete. Downsized: 124ft on the North side 8 74ft on the East side APR 0 2 2013 NMOCD ARTESIA Accepted for Record Purposes. Approval Subject to Onsite Inspection. If BLM Objectives are not achieved, additional work may be required. Date: 3 Journal Signature: Signature: Signature:						
14. I hereby certify that the foregoing is true and correct. Electronic Submission #201521 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 03/19/2013 () Name(Printed/Typed) KANICIA CASTILLO Title PREPARER						
Signature (Electronic Submission) Date 03/14/2013						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
A approved By	· ·	Title			Date	
Approved By	Title			Date		
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu-		·		·		
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a crime tatements or representations as to an	e for any person knowingly and matter within its jurisdiction.	willfully to make to	any department or	agency of the United	