

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 type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMNM96849
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: STORMI DAVIS E-Mail: sdavis@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 2208 WEST MAIN STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946 Fx: 575-748-6968	8. Well Name and No. ROCKET FEDERAL 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T26S R29E SESE 116FSL 564FEL		9. API Well No. 30-015-34795
		10. Field and Pool, or Exploratory SWD; DELAWARE
		11. County or Parish, and State EDDY COUNTY, NM

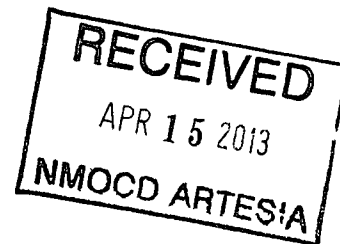
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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
	<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 recompleat 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 requests the following changes to the Conditions of Approval to convert to SWD as previously discussed with Wesley Ingram:

8. BOPE. We would like to request that we not install a choke manifold unless well conditions dictate its use. We are working in a cased-hole well bore that encountered no pressure or flows in the Delaware section when the well was drilled. Based on mud log and log calculation data, we believe that the zones to be perforated are wet and not productive of oil or gas. The current horizontal completion zone is watered out. We plan to use a 3000 or 5000 psi working pressure double ram (pipe and blind rams) BOP, possibly a manual BOP, but likely a hydraulic BOP with closing unit and hand wheels to allow manual closure of the BOP. If hydraulic BOP's are used, the closing unit will have accumulator bottles and a reciprocating engine-powered pump to give two methods of operating the BOP's which is a standard work over BOP package available from our



14. I hereby certify that the foregoing is true and correct.		Accepted for record NMOCD LRD/ade 4/15/13
Electronic Submission #175233 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 01/04/2013 ()		
Name (Printed/Typed) STORMI DAVIS	Title PREPARER	
Signature (Electronic Submission)	Date 01/02/2013	

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 _____	

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 to any department or agency 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 ****

Additional data for EC transaction #175233 that would not fit on the form

32. Additional remarks, continued

contractors in this area. A kill truck will be used to keep the well killed while working on the well.

20. Production test and log evaluation. As we discussed in our meeting at your office on December 19th, I think you intended for the conditions of approval to include a requirement that we give you a log evaluation and swab test the injection interval to verify that it isn't commercially hydrocarbon productive. I previously sent the mud log and porosity log annotated with water saturation and bulk volume water calculations (BVW). Please note that the original, now watered-out pay zone had a good oil show, and that the proposed disposal interval has no oil shows. We plan to swab test the entire proposed injection interval, after acidizing, as one zone. More zone-specific testing will be done if a significant oil show occurs when swab testing.