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	UNITED STATES EPARTMENT OF THE INTERIOR UREAU 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.					5. Lease Serial No. NMLC028731B			
					6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No. NMNM111789X			
Type of Well     Gas Well     Other					<ol> <li>Well Name and No. DODD FEDERAL</li> </ol>			
2. Name of Operator Contact: CHASITY JACKSON COG OPERATING LLC E-Mail: cjackson@concho.com					9. API Well No. 30-015-40597-00-X1			
	a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701 3b. Phone No. ( Ph: 432-686-				10. Field and Pool, or Exploratory DODD - GLORIETA-UPPER YESO			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, and State			
Sec 10 T17S R29E NESE 2500FSL 330FEL					EDDY COUNTY, NM			
12. CHECK APP	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF N	NOTICE, REF	PORT, OR OTHE	R DATA		
TYPE OF SUBMISSION	TYPE OF ACTION							
□ Notice of Intent	Acidize Deepen		pen	Production (Start/Resume)		□ Water Shut-Off		
Subsequent Report	Alter Casing			C Reclamati	_ 0		tegrity	
☐ Final Abandonment Notice	<ul> <li>Casing Repair</li> <li>New Constructio</li> <li>Change Plans</li> <li>Plug and Abando</li> <li>Convert to Injection</li> <li>Plug Back</li> </ul>			-	□ Recomplete		1	
					-			
13. Describe Proposed or Completed Op If the proposal is to deepen direction Attach the Bond under which the wo following completion of the involved testing has been completed. Final A determined that the site is ready for the second sec	ally or recomplete horizontally, rk will be performed or provide d operations. If the operation re bandonment Notices shall be fil	give subsurface the Bond No. o sults in a multip	locations and measure n file with BLM/BIA le completion or reco	red and true verti Required subsempletion in a net	ical depths of all pertir equent reports shall be w interval, a Form 316	nent markers an filed within 30 50-4 shall be fil	id zones. ) days ed once	
4/13/13 Spud 17-1/2 @ 5:15F 4/14/13 Ran 6jts 13-3/8 H40 4 to 2000# for 30min ok. 4/15/13 TD 11 @ 960. Ran 2: 4/16/13 Cmt w/300sx C. lead, for 30min ok. 4/18/13 TD 7-7/8 @ 4440. Ra 4/19/13 Cmt w/500sx C. lead,	48# @ 269. Cmł w/400sx Bjts 8-5/8 J55 24# @ 960. 200sx C. tail. PD @ 4:24 In 101jts 5-1/2 J55 17# @ 400sx C. tail. Circ 212sx.	AM. Circ 160	sx. WOC .18hrs. <sup>-</sup> . RR.		RECE	8 2013	A	
14. I hereby certify that the foregoing is	s true and correct. Electronic Submission #	205777 vorifio	d by the PLM Mol					
Comn	For COG O nitted to AFMSS for process	PERATING LI	LC. sent to the Ca	arlsbad				
Name (Printed/Typed) CHASITY	Title PREPA							
Signature (Electronic	Submission)		Date 04/30/20	013				
	THIS SPACE FO		L OR STATE	OFFICE US	E			
Approved By ACCEPTED				JAMES A AMOS TitleSUPERVISOR EPS Date 05/05/20			05/05/2013	
Conditions of approval, if any, are attached certify that the applicant holds legal or eq which would entitle the applicant to cond	Office Carlsbad							
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent				willfully to make	e to any department or	agency of the	United	

\*\* BLM REVISED \*\*

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