Form 3160-5 (August, 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD Artesia

FORM APPROVED OMB No. 1004-0137

Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

5. Lease Serial No. NMNM117121 6. If Indian, Allottee, or Tribe Name

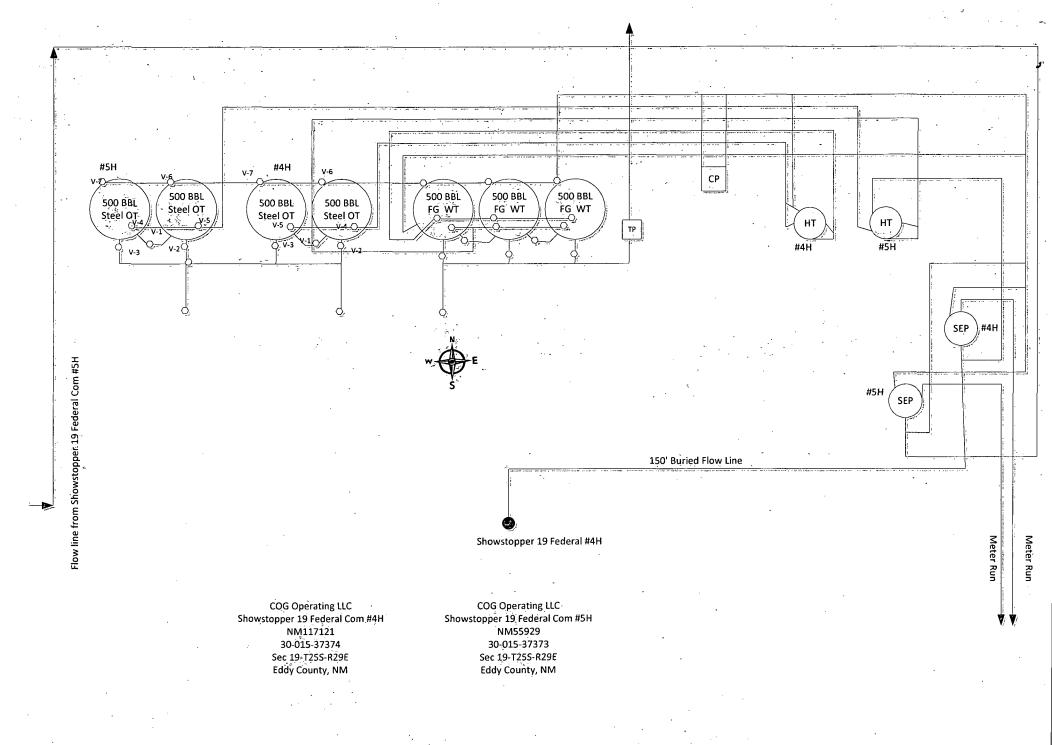
abandoned well. Use Form 3160-3 (APD) for such proposals.				· .		
SUBMIT IN TRIPLICATE - Other Instructions on page 2.				7. If Unit or CA. Agreement Name and/or No.		
Type of Well Gas Well Gas Well	Other			8. Well Name and		
Name of Operator			Showstopper 19 Federal Com #5H			
COG Operating LLC				9. API Well No.	· .	
a. Address 3b. Phone No. (include area code)		area code)	30-015-37373			
2208 W. Main Street 575-		575-748	575-748-6940			
Artesia, NM 88210				10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Lat.				Willow Lake; Bone Spring; SE		
330' FSL & 2310' FWL,	Long.		11. County or Parish, State Eddy County NM			
2. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION TYPE OF ACTION				· · · · · · · · · · · · · · · · · · ·		
Notice of Intent	Acidize	Deepen	Production (Star	rt/ Resume)	Water Shut-off	
•	Altering Casing	Fracture Treat	Reclamation		Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	·
	Change Plans	Plug and abandon	Temporarily Aba	andon	Site Facility	Diagram
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposal			
If the proposal is to deepen dire Attach the Bond under which the following completion of the involve	Operation (clearly state all pertinent ectionally or recomplete horizontally; work will performed or provide the ed operations. If the operation results Abandonment Notice shall be filed all inspection.)	give subsurface locations Bond No. on file with the in a multiple completion	and measured and ne BLM/ BIA. Requi or recompletion in	true vertical dept ired subsequent r a new interval,	ths or pertinent mark eports shall be filed a Form 3160-4 shall	ers and sands. within 30 days be filed once

Please see attached Site Facility Diagram.



Accepted for Record Purposes.

INM	Approval Subject to Onsite Inspections.			
14. I.hereby certify that the foregoing is true and correct. Name (Printed/ Typed)	Title:			
Amy Avery	Regulatory Technician			
Signature: Amy Avery	Date: 5/22/13			
U THIS SPACE FOR FEDE	RAL OR STATE OF PER FOR DECORD			
/s/ Jerry Blakley	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.				
Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a criminate any false, fictitious or fraudulent statements or representations as to any matter within its	e for any person knowing y and willfully to make any department or agency of the United jurisdiction.			
	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE			
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COG Operating LLC

Showstopper 19 Federal Com #4H

NM117121

30-015-37374

Sec 19-T25S-R29E

Eddy County, NM

Production Phase

Valves 1,2,3, closed

Valves 4 or 5 open

Valves 6 or 7 open

Sales Phase

Valve 1 Open

Valves 2 or 3 open

Valves 6 or 7 closed

Valves 4 or 5 open

Showstopper 19 Federal #5H

NM55929

30-015-37373

Sec 19-T25S-R29E

Eddy County, NM

Production Phase

Valves 1,2,3 closed

Valves 4 or 5 open

Valves 6 or 7 open

Sales Phase

Valve 1 open

Valves 2 or 3 open

Valves 6 or 7 closed

Valves 4 or 5 open