

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.*5. Lease Serial No.  
NMLC028793A

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.  
NMNM88525X

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.  
BURCH KEELY UNIT 5822. Name of Operator  
COG OPERATING LLCContact: KANICIA CASTILLO  
E-Mail: kcastillo@conchoresources.com9. API Well No.  
30-015-402723a. Address  
ONE CONCHO CENTER 600 W. ILLINOIS AVENUE  
MIDLAND, TX 797013b. Phone No. (include area code)  
Ph: 432-685-433210. Field and Pool, or Exploratory  
BK GLORIETA-UPPER YESO

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 18 T17S R30E Mer NMP 1310FSL 2025FEL

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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Venting and/or Flaring
	<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, respectfully request to flare the Burch Keely Unit 18B Battery.

Located at the BKU 582 well.

Number of wells to flare: (12)

API #'s attached.

100 Oil  
500 MCF

Requesting 90 day flare approval from 8/06/13 to 11/06/13.

RDoble 8/20/13  
Accepted for record  
NMOCSUBJECT TO LIKE  
APPROVAL BY STATESEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #211126 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 06/20/2013 ()	
Name (Printed/Typed) KANICIA CASTILLO	Title PREPARER
Signature (Electronic Submission)	Date 06/19/2013
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By	Title
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
BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	

APPROVED

AUG 17 2013

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

**Additional data for EC transaction #211126 that would not fit on the form**

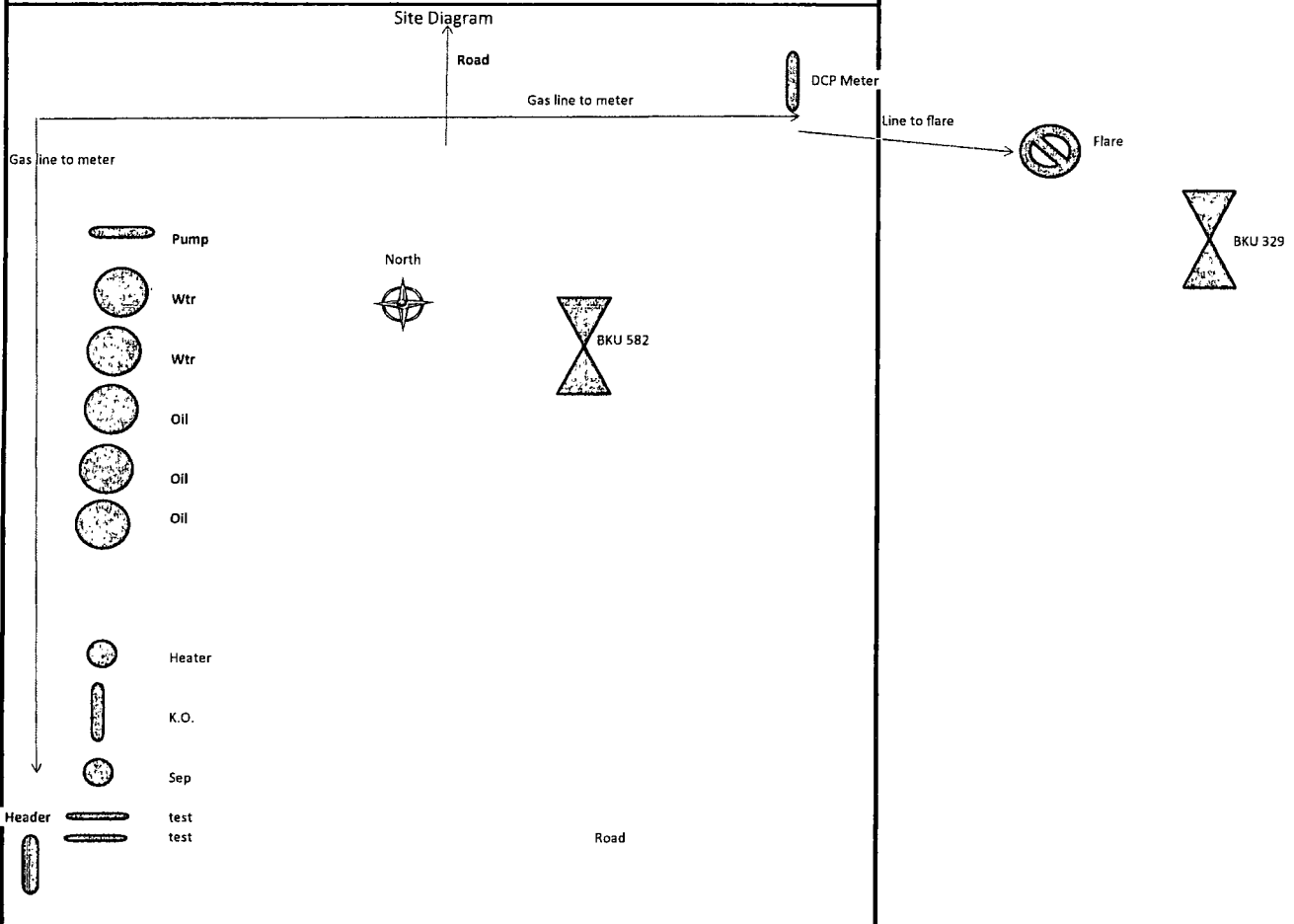
**32. Additional remarks, continued**

Due to: DCP shut in.

Schematic attached.

# Flare Request Form

Battery-	BKU 18B Battery		
Production-	100 oil-500 gas		
Total BTU of Htrs-	1,000,000		
Flare Start Date-	6/4/2013	Flare End Date-	9/4/2013
UL Sec-T-R-	Unit B Sec.19-T17S-R30E	GPS-	N 32°49.927 W104°00.416'
# of wells in bty-	12	# of wells to be flared-	12
Reason For Flare-	DCP shut in		



**BKU 18B Battery**

Well #	API Number
347 ✓	30-015-28090
28 ✓	30-015-04188
297 ✓	30-015-30731
27 ✓	30-015-04189
382 ✓	30-015-33811
275 ✓	30-015-29774
25 ✓	30-015-23168
329 ✓	30-015-34426
303 ✓	30-015-30789
257 ✓	30-015-29035
353 ✓	30-015-03787
582	30-015-40272

BUREAU OF LAND MANAGEMENT  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972

7/2/2013

**Condition of Approval to Flare Gas**

1. Report all volumes on OGOR reports.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. **Flared volumes will still require payment of royalties**
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days for date of approval.
9. Submit Subsequent Report with actual volumes of gas flared for each month gas is flared.
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JDB722013