

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NM OIL CONSERVATION**  
OCD - ARTESIA DISTRICT  
NOV 17 2014

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.*

**RECEIVED**

5. Lease Serial No. NMLC029342A
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. WOOLLEY FEDERAL 10
9. API Well No. 30-015-32348-00-S1
10. Field and Pool, or Exploratory LOCO HILLS-PADDOCK UNKNOWN
11. County or Parish, and State EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator COG OPERATING LLC	Contact: DAVID A EYLER E-Mail: DEYLER@MILAGRO-RES.COM
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-687-3033
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 21 T17S R30E SESW 990FSL 2260FWL	

**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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recomplete 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 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.)

09/13/14: SET 5-1/2" CIBP @ 4,600'; CIRC. WELL W/ PXA MUD; PRES. TEST CSG. TO 600#-HELD OK; PUMP 60 SXS.CMT. @ 4,600'-4,215'; PUMP 30 SXS.CMT. @ 3,165'; WOC.  
09/14/14: TAG CMT. PLUG @ 2,908'; PUMP 40 SXS.CMT. @ 1,325'; WOC X TAG CMT. PLUG @ 1,040'; MIX X CIRC. TO SURF. 75 SXS.CMT. @ 645'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; SPOT 20 SXS.CMT. TO BRING TOC BACK TO SURF.; WELD ON STEEL PLATE TO CSGS. X INSTALL GROUND LEVEL DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 09/14/14.

Accepted for record  
LEO NMOCB 11/21/14

Accepted as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.

*Reclamation Due 3/14/15*

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #263571 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by JAMES AMOS on 10/13/2014 (14JA1138SE)</b>	
Name (Printed/Typed) DAVID A EYLER	Title AGENT
Signature (Electronic Submission)	Date 09/15/2014
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By _____	Title _____ Date NOV 8 2014
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.	

**ACCEPTED FOR RECORD**

NOV 8 2014  
*[Signature]*

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE