Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesta

FORM APPROVED OMB NO. 1004-0135

	Expires: July 31, 2010	
5.	Lease Serial No. NMNM90521	Ÿ

SUNDRY	NMNM90521 6. If Indian, Allottee or Tribe Name						
Do not use thi abandoned we							
SUBMIT IN TRI	7. If Unit or CA/Agreement, Name and/or No.						
1. Type of Well	8. Well Name and No. STORYTELLER 6 FEDERAL COM 1H						
2. Name of Operator		9. API Well No.					
COG OPERATING LLC	EYES		30-015-41561-	1 1 1	•		
3a. Address ONE CONCHO CENTER 600 MIDLAND, TX 79701	include area code) -6945 10. Field and Pool, or Exploratory WILDCAT			Exploratory .			
4. Location of Well (Footage, Sec., T			11. County or Parish,	and State			
Sec 6 T24S R28E Lot 4 330F	·	EDDY COUNTY, NM					
12. CHECK APPI	ROPRIATE BOX(ES) TO) INDICATE	NATURE OF N	OTICE, RE	EPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION	ACTION						
Notice of Intent	☐ Acidize	☐ Deep	en	☐ Producti	on (Start/Resume)	■ Water Shut-Off	
	☐ Alter Casing ☐ Frac		cture Treat		ition	■ Well Integrity	
☐ Subsequent Report	□ Casing Repair	□ New	Construction	☐ Recomp	lete	Other	
☐ Final Abandonment Notice	Change Plans	🗖 Plug	and Abandon		arily Abandon		
☐ Convert to Injection ☐ Plug			Back Water Disposal				
13. Describe Proposed or Completed Opt If the proposal is to deepen direction. Attach the Bond under which the wo following completion of the involved testing has been completed. Final At determined that the site is ready for f	rk will be performed or provide Loperations: If the operation re candonment Notices shall be fil	the Bond No. or sults in a multipl	i file with BLM/BIA e completion or reco	Required sub moletion in a r	sequent reports shall be new interval, a Form 310	e filed within 30 days 50-4 shall be filed once	
COG Operating LLC, respectf	ully requests approval for	a Z year exte	nsion on the abo	ove referenc	ed.APD.		
	,				100 5/	19/15	
			• .		ccepted for re	cord	
	NM OIL CONSEF	NOITAV	÷	^	NMOCD		
	ARTESIA DIST			APPROVE	D FOR 12 MON	ITH PERIOT	
•	MAY 18 2	015			7-16-201		
	·						
•	RECEIVE	:D					
14. I hereby certify that the foregoing is	Electronic Submission # For COG C	PERATING L	C, sent to the Ca	arlsbad			
Name(Printed/Typed) MAYTE >	nitted to AFMSS for proces	sing by JENN		n 04/09/2015 ATORY AN	` '	•	
Transcribed peny WATTE 7	CHELEO .		Tide TIEGOL	ATONT AN	AL 1,91	· \	
Signature (Electronic S	Submission)	·	Date 04/09/2	015		. •	
	THIS SPACE FO	OR FĘDERA	L OR STATE	OFFICE U	SE		
Approved By J. O. M.	thools		Title EPS			Date 8/1.5	5
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to condition	uitable title to those rights in the		Office CFO				