

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.
NMNM93205

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
ICE DANCER 30 FEDERAL COM 2H2. Name of Operator
COG OPERATING LLC
Contact: MAYTE X REYES
E-Mail: mreyes1@concho.com9. API Well No.
30-015-394733a. Address
2208 WEST MAIN STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-694510. Field and Pool, or Exploratory
FORTY NINER RIDGE; BS, W

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

Sec 12 T22S R32E SWSE 475FSL 1890FEL

30-T23S-R30E

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 | Change to Original APD |
| | <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.)

COG Operating LLC, respectfully requests approval to add a flex hose variance report to the original approved APD.

Flex Hose Variance attached.

NM OIL CONSERVATION
ARTESIA DISTRICT

SEP 21 2015

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**WDO 9/23/15
Accepted for record
NMOC

RECEIVED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #315634 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by KENNETH RENNICK on 09/14/2015 ()

Name (Printed/Typed) MAYTE X REYES

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 09/08/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

APPROVED
PETROLEUM ENGINEER

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.

Office

SEP 14 2015

Kenneth Rennick

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.

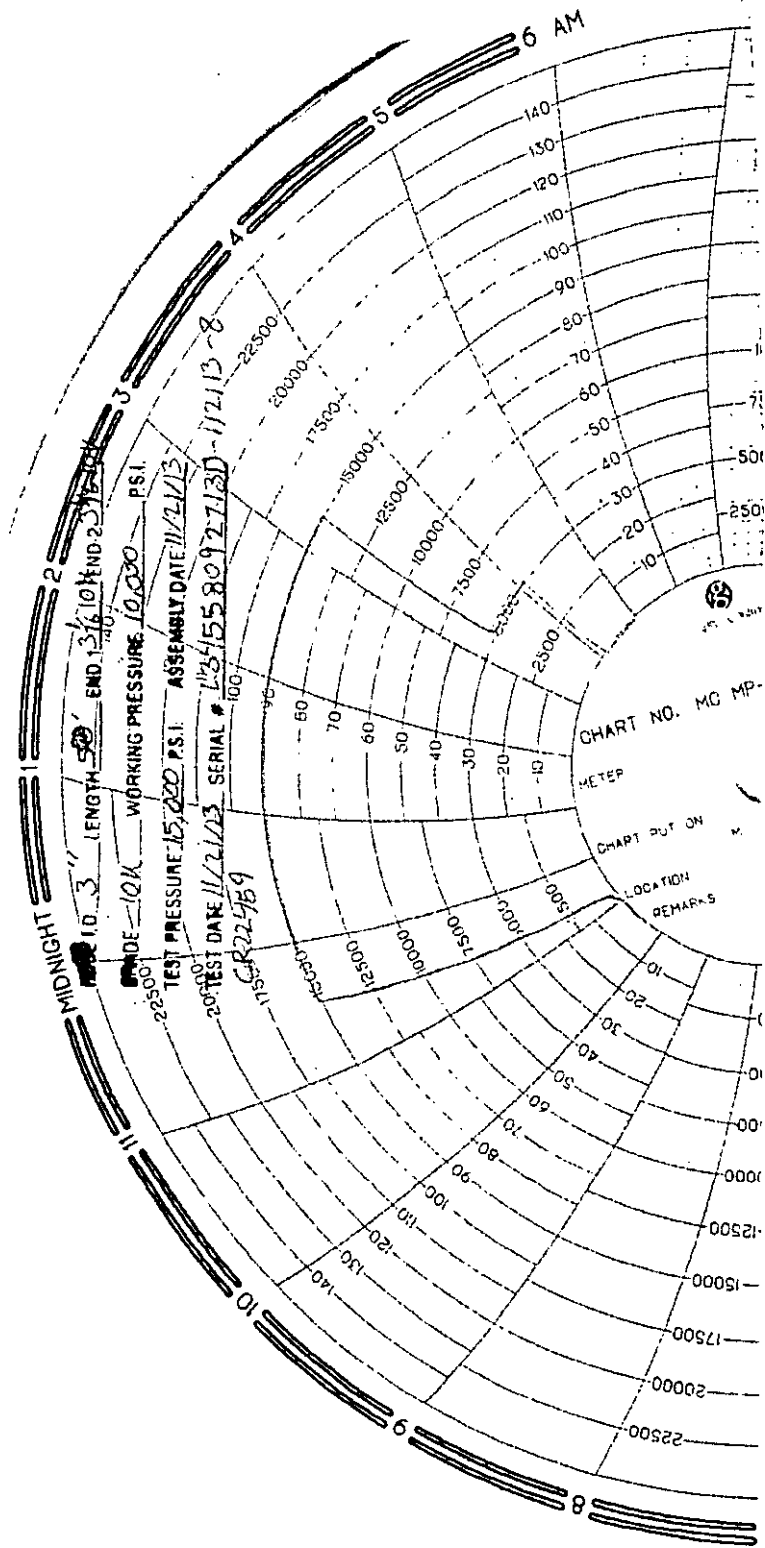
BUREAU OF LAND MANAGEMENT**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

PECOS DISTRICT CONDITIONS OF APPROVAL

| | |
|-----------------------|-------------------------------------|
| OPERATOR'S NAME: | COG OPERATING LLC |
| LEASE NO.: | NMNM93205 |
| WELL NAME & NO.: | ICE DANCER 30 FEDERAL COM -2H |
| SURFACE HOLE FOOTAGE: | 475' FSL & 1890' FEL |
| BOTTOM HOLE FOOTAGE: | 375' FNL & 1980' FEL |
| LOCATION: | Section 30, T. 23 S., R 30 E., NMPM |
| COUNTY: | Eddy County, New Mexico |

Original COA still applies except of the approval and the conditions of the use for a flex hose within the Pressure Control Section of the approved Drilling Program (VII. C.). The reference conditions follows:

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. These documents shall be posted in the company man's trailer and on the rig floor.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).





GATES E & S NORTH AMERICA, INC
DU-TEX
134 44TH STREET
CORPUS CHRISTI, TEXAS 78405

PHONE: 361-887-9807
FAX: 361-887-0812
EMAIL: crpe&s@gates.com
WEB: www.gates.com

10K CHOKE & KILL ASSEMBLY PRESSURE TEST CERTIFICATE

| | | | |
|----------------------|----------------------------|------------------|------------------------|
| Customer : | SPECIALTY SALES, INC. | Test Date: | 11/21/2013 |
| Customer Ref. : | 49680-S | Hose Serial No.: | D-112113-8 |
| Invoice No. : | 197465 | Created By: | Norma M. |
| Product Description: | 10K3.050.0CK31/1610KFLGE/E | | |
| End Fitting 1 : | 3 1/16 10K FLG | End Fitting 2 : | 3 1/16 10K FLG |
| Gates Part No. : | 47773-4290 | Assembly Code : | L34558092713D-112113-8 |
| Working Pressure : | 10,000 PSI | Test Pressure : | 15,000 PSI |

Gates E & S North America, Inc. certifies that the following hose assembly has been tested to the Gates Oilfield Roughneck Agreement/Specification requirements and passed the 15 minute hydrostatic test per API Spec 7K/Q1, Fifth Edition, June 2010, Test pressure 9.6.7 and per Table 9 to 15,000 psi in accordance with this product number. Hose burst pressure 9.6.7.2 exceeds the minimum of 2.5 times the working pressure per Table 9.

| | | | |
|-------------------|------------|------------------------|------------|
| Quality Manager : | QUALITY | Technical Supervisor : | PRODUCTION |
| Date : | 11/22/2013 | Date : | 11/22/2013 |
| Signature : | | Signature : | |

