Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesla

FORM APPROVED OMB NO. 1004-0135

Expires: July 31, 2010 5. Lease Serial No. NMLC064488E

| SUNDRY NOTICES AND REPORTS ON WELLS | |
|---|---|
| Do not use this form for proposals to drill or to re-enter ar | 7 |
| abandoned well. Use form 3160-3 (APD) for such proposal | S |

| 5 | If Indian | Allottee | or Tribe | Mama |
|---|-----------|----------|----------|------|

| abandoned well. Use form 3160-3 (APD) for such proposals. | | | | or Tribe Name | | | |
|---|---|--|---|------------------------|--|--|--|
| SUBMIT IN TRI | 7. If Unit or CA/Agr | eement, Name and/or No. | | | | | |
| 1. Type of Well | | 8. Well Name and No. BUCKSKIN 3 FED 6 | | | | | |
| 2. Name of Operator COG OPERATING LLC | 9. API Well No. 30-015-41140- | 00-X1 | | | | | |
| 3a. Address ONE CONCHO CENTER 600 MIDLAND, TX 79701 |) 10. Field and Pool, o DAYTON | | | | | | |
| 4. Location of Well (Footage, Sec., T. | 11. County or Parish, | , and State | | | | | |
| Sec 3 T19S R25E SESW 330 | EDDY COUNT | Y, NM | | | | | |
| 12. CHECK APP | ROPRIATE BOX(ES) TO II | NDICATE NATURE OF I | NOTICE, REPORT, OR OTHE | ER DATA | | | |
| TYPE OF SUBMISSION | F ACTION | | | | | | |
| Notice of Intent . | ☐ Acidize | ☐ Deepen | ☐ Production (Start/Resume) | ☐ Water Shut-Off | | | |
| _ | ☐ Alter Casing | Fracture Treat | ☐ Reclamation | ☐ Well Integrity | | | |
| ☐ Subsequent Report | ☐ Casing Repair | ☐ New Construction | ☐ Recomplete | Other | | | |
| ☐ Final Abandonment Notice | ☐ Change Plans | ☐ Plug and Abandon | □ Temporarily Abandon | | | | |
| | ☐ Convert to Injection | ☐ Plug Back | ☐ Water Disposal | | | | |
| following completion of the involved testing has been completed. Final Ab determined that the site is ready for fit COG Operating LLC respectfu 02/15/2015. | nandonment Notices shall be filed on all inspection.) Illy requests a two year external of the control of the | nly after all requirements, includ | (CD) (C Accepted) | and the operator has | | | |
| | | | OMA | にひ | | | |
| | UC | T 1 4 2015 | DD 01 24 | | | | |
| | | | PROVED FOR 24 MONTH | PERIOD | | | |
| ř | R | ECEIVED EN | DING 2-15-2017 | ······ | | | |
| , | | - | | | | | |
| 14. I hereby certify that the foregoing is | Electronic Submission #290 | RATING LLC. sent to the C | arlsbad | | | | |
| Name (Printed/Typed) ROBYN O | I | Title REGUALTORY ANALYST | | | | | |
| Signature · (Electronic S | dubmission) | Date 02/03/2 | 2015 | | | | |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE | | | | | | | |
| Approved By J.D. Who | Hoch 2 | Title LPE | 7 | Date 8/15 | | | |
| Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu- | itable title to those rights in the sul ct operations thereon. | oject lease Office | -o | | | | |
| Title 18 H.S.C. Section 1001 and Title 43 I | ILS C. Section 1212, make it a crin | ne for any person knowingly and | Luillfully to make to any department of | r agency of the United | | | |