Form 3160-5 (June 2015)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0137 Expires: January 31, 2018

5. Lease Serial No. NMNM119277

6. If Indian, Allottee or Tribe Name

## SUNDRY NOTICES AND REPORTS ON WELLS

	form for proposals : Use Form 3160-3 (A						
SUBMIT INTRIPLICATE - Other instructions on page 2					7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well					NMNM130780		
Oil Well Gas Well Other					8. Well Name and No. BURTON 35 #1		
2. Name of Operator COG OPERATING LLC					9. API Well No. 30-025-40510		
			nchule area cod			0. Field and Pool or Exploratory Area	
			)		RED HILLS; WOLF	CAMP	
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)					11. Country or Parish, S	tate	
660' FNL & 660' FEL, SECTION 35, T25S, R33E					LEA COUNTY, NM		
12. CHE	CK THE APPROPRIATE B	OX(ES) TO INDI	ICATE NATUR	E OF NOTE	CE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION			TY	YPE OF ACT	TION		
Notice of Intent	Acidize Alter Casing	Deeper Hydrau	n ulic Fracturing	=	uction (Start/Resume) umation	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	☐ New C	Construction	Reco	mplete	<b>✓</b> Other	
T samuelment report	Change Plans	Plug a	nd Abandon	Temp	orarily Abandon		
Final Abandonment Notice	Convert to Injection	n Plug B	ack	Wate	r Disposal		
the Bond under which the work will completion of the involved operating completed. Final Abandonment Notice ready for final inspection.)  CHANGE OF OPERATOR  As required by 43 CFR 3100.0  COG Operating LLC, as the necesser or portion of the lease of COG Operating LLC meets fee Bond Coverage: Individually BLM Bond File No. NMB00074	ons. If the operation results in tices must be filed only after the control of th	in a multiple comp r all requirements, , we are notifying pplicable terms, is as follows (43 NM OIL AR	pletion or recom- including rectar g you of a char conditions, sti	nge in open pulations, a RVATION	new interval, a Form 316 been completed and the ator on the above refe	60-4 must be filed once testing has e operator has detennined that the renced well.  ROYED  2015	as been e site
14. I hereby certify that the foregoing is	true and correct Name (Br		· · · · · · · · · · · · · · · · · · ·		10	TAND MANAGEMENT	2
Melanie J. Wilson	strue and correct. Name [17		Lead Re	gulatory An	alyst BUREAU CARL	F LAND MANAGEMENT	,
Signature Ala	nie Milo	100C	Date		11/24/20		
	THE SPACE	FOR FEDE	RAL OR S	TATE OF	ICE USE		
Approved by			Title		D	ate	
Conditions of approval, if any, are attac certify that the applicant holds legal or which would entitle the applicant to co	equitable title to those rights			,,,			
Title 18 U.S.C Section 100! and Title 4 any false, fictitious or fraudulent staten					fully to make to any dep	artment or agency of the United	States

(Instructions on page 2)