| Form 3160-5<br>(August 2007)   | August 2007) UNITED STATES OCD Artesia<br>DEPARTMENT OF THE INTERIOR<br>BUREAU OF LAND MANAGEMENT<br>SUNDRY NOTICES AND REPORTS ON WELLS |   |                                    |  |  | FORM APPROVED<br>OMB NO. 1004-0135<br>Expires: July 31, 2010<br>5. Lease Serial No.<br>NMLC028784B |  |
|--|--|---|------------------------------------|--|--|--|--|
| Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.  |  |   |                                    |  |  | 6. If Indian, Allottee or Tribe Name   |  |
| SUBMIT IN TRIPLICATE - Other instructions on reverse side.   |  |   |                                    |  |  | 7. If Unit or CA/Agreement, Name and/or No.  |  |
| 1. Type of Well<br>☐ Gas Well ☐ Other  |  |   |                                    |  |  | 8. Well Name and No.<br>BURCH KEELY UNIT 130   |  |
| 2. Name of Operator Contact: BRIAN MAIORINO<br>COG OPERATING LLC E-Mail; bmaiorino@concho.com  |  |   |                                    |  |  | 9. API Well No.<br>30-015-03118-00-S1  |  |
| 3a. Address  | IOIS AVENUE  | 3b. Phone No. (include area code)<br>Ph: 432-221-0467   |                                    |  | 10. Field and Pool, or Exploratory<br>GRAYBURG |  |  |
|  | ell (Footage, Sec., T.   | · · · · · · · · · · · · · · · · · · ·   |                                    |  | 11. County or Parish, and State                |  |  |
| Sec 26 T175  | S R29E NWNE 66   |   |                                    |  | EDDY COUNTY, NM                                |  |  |
| 1  | 2. CHECK APPF  | OPRIATE BOX(ES) TO  | O INDICATE                         | NATURE OF  | NOTICE, R                                      | EPORT, OR OTHE   | R DATA   |
| TYPE OF S  | UBMISSION  | TYPE OF ACTION  |                                    |  |  |  |  |
| □ Notice of I  | ntent  |   |                                    | Deepen   |  | tion (Start/Resume)  | □ Water Shut-Off                               |
| —  |  | Alter Casing  | 🗂 Frac                             | ture Treat   | Reclamation                                    |  | Well Integrity                                 |
|  | ubsequent Report Casing Repair   |   | New Construction                   |  | Recomplete                                     |  | Other  |
| 🛛 Final Abar   | idonment Notice  | Change Plans Convert to Injection   | Plug and Abandon Plug Back         |  | Temporarily Abandon Water Disposal             |  |  |
| If the proposal<br>Attach the Bon  | is to deepen directiona<br>d under which the wor   | eration (clearly state all pertine)<br>illy or recomplete horizontally,<br>k will be performed or provide | give subsurface<br>the Bond No. or | locations and mease<br>n file with BLM/BL                                  | ured and true vo<br>A. Required su             | ertical depths of all pertin<br>bsequent reports shall be  | ent markers and zones.<br>filed within 30 days |
| following comp<br>testing has been   | pletion of the involved  | operations. If the operation re<br>andonment Notices shall be fil   | sults in a multip                  | le completion or rec   | ompletion in a                                 | new interval, a Form 316   | 0-4 shall be filed once                        |
| Removed we marker.   | ell head, anchors,   | flowline, and all other de  | bris from loca                     | ition, installed di  | ry hole  |  |  |
| Removed ca   | aliche and contami   | inated soil from location a   | and access ro                      | ad   |  |  |  |
| added 1-2 ft   | clean topsoil as n   | eeded   |                                    |  |  |  | ENATION  |
| Leveled and  | contoured surrou   |   |                                    |  | NM OIL CONSERVATION                            |  |  |
| Rip and see  | d disturbed area w   |   |                                    |  | NFC 21   | 2015   |  |
| Job complet  |  | Acceptso  | 14173007                           |  | ,  |  |  |
|  |  | (R) 12/20/  |                                    |  | S RECEIVED                                     |  |  |
| 14. I hereby certif  | fy that the foregoing is   | # Electronic Submission<br>For COG C  | DPERATING L                        | LC, sent to the C  | arisbad  |  |  |
| Name (Printed)   |  |   | essing by KU                       | URT SIMMONS on 11/28/2012 (13KMS3988SE)<br>Title AUTHORIZED REPRESENTATIVE |  |  |  |
|  |  |   |                                    |  |  |  |  |
| Signature  | (Electronic S  |   | Date 11/27/2012                    |  |  |  |  |
| <u> </u>   | =  | THIS SPACE FO   |                                    | T  |  | SE   | <u> </u>                                       |
| Approved ByA   |  | JAMES A AMOS<br>TitleSUPERVISORY PET Date 12/   |                                    | Date 12/16/2015  |  |  |  |
| Conditions of approval, if any, are attached. Approval of this notice does not was<br>certify that the applicant holds legal or equitable title to those rights in the subject<br>which would entitle the applicant to conduct operations thereon. |  |   |                                    | r<br>Office Carlsbad   |  |  |  |
| Title 18 U.S.C. Sect<br>States any false, fi   | tion 1001 and Title 43<br>octitious or fraudulent s  | U.S.C. Section 1212, make it a statements or representations as   | crime for any p<br>to any matter w | erson knowingly an<br>ithin its jurisdiction                               | d willfully to m                               | ake to any department or   | agency of the United                           |
|  | ** BLM REV   | ISED ** BLM REVISEI   | D ** BLM R                         | EVISED ** BLI  | M REVISEI                                      | D ** BLM REVISE  | D **   |

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