NM OIL CONSERVATION ARTESIA DISTRICT

JAN PATENTE

	RECEIVED								
Form 3160-5 (August 2007)	DEPARTN	UNITED STATES EPARTMENT OF THE INTERIOR UREAU OF LAND MANAGEMENT					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. NMLC028793C		
						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 Gas Well Other							8. Well Name and No. BURCH KEELY UNIT 249		
2. Name of Operator Contact: BRIAN MAIORINO COG OPERATING LLC E-Mail: bmaiorino@concho.com							9. API Well No. 30-015-27575		
3a. Address 3b. Phone No. (include area code) ONE CONCHO CENTER 600 W. ILLINOIS AVE Ph: 432-221-0467 MIDLAND, TX 79701 Ph: 432-221-0467							10. Field and Pool, or Exploratory GRAYBURG		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)							11. County or Parish, and State		
Sec 23 T17S R29E SWNW 1650FNL 1150FWL							EDDY COUNTY, NM		
12. CHEC	K APPROPRIA	ATÉ BOX(ES) T	D INDI	CATE NATURE	OF NO	DTICE, R	EPORT, OR OTHE	R DATA	
TYPE OF SUBMISSIC	Ń	TYPE OF ACTION							
Notice of Intent	-	cidize		Deepen		_	ion (Start/Resume)	UWater Shut-Off	
Subsequent Report		Iter Casing		Fracture Treat		Reclamation		□ Well Integrity	
				New Construction			omplete Other		
🗧 🗖 Final Abandonment N	hange Plans onvert to Injection					Temporarily Abandon Water Disposal			
If the proposal is to deepen Attach the Bond under whit following completion of the testing has been completed, determined that the site is re Removed wellhead, an Removed caliche and added 1-2 feet clean to leveled and contoured Rip and seeded distur Job complete 6/16/14	the work will be involved operation Final Abandonme eady for final inspe nchors, and all of contaminated s op soil as neede surrounding ar	performed or provide ns. If the operation re- ent Notices shall be fil- ction.) other debris from soil from location a ed ea bLM #2 seed mix	the Bon sults in a ed only a location and acc	d No. on file with BLN multiple completion o after all requirements, i n, installed dry hole ess road	d/BIA. or recom including	e ACC	besequent reports shall be new interval, a Form 316 n, have been completed, EPTED FOF	filed within 30 days 50-4 shall be filed once and the operator has RECORD 2015	
14. I hereby certify that the fo	Electro	onic Submission # For COG C hitted to AFMSS fo	PERAT	verified by the BLM ING LLC, sent to the ssing by LINDA DE	he Carl NNIST(sbad DN on 08/1	8/2014 ()		
Name(Printed/Typed) BRIAN MAIORINO				Title AU	Title AUTHORIZED REPRESENTATIVE				
Signature (El	Date 06/2	Date 06/27/2014							
······································	7	THIS SPACE FO	DR FE	DERAL OR STA	TE O	FFICE U	SE		
_Approved By				Title	Title Date				
Conditions of approval, if any, a certify that the applicant holds le which would entitle the applican	lease Office	<u> </u>							
Title 18 U.S.C. Section 1001 and	i Title 43 U.S.C. Se	ection 1212, make it a	crime fo	r any person knowing!	v and w	illfully to ma	ake to any department or	agency of the United	

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.