Form 3160-5 (August 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU 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 2150 2 (450)

Lease Serial No. NMNM100858

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. NMNM130831	
1. Type of Well  Gas Well Gas Well Other				8. Well Name and No. BLUE THUNDER 5 FEDERAL 7H	
2. Name of Operator Contact: BRIAN MAIORINO COG OPERATING LLC E-Mail: bmaiorino@concho.com				9. API Well No. 30-015-40874-00-S1	
3a. Address ONE CONCHO CENTER 600 MIDLAND, TX 79701	ne No. (include area code 2-221-0467	) 1	10. Field and Pool, or Exploratory HACKBERRY		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, and State	
Sec 5 T19S R31E Lot 1 660FNL 200FEL				EDDY COUNTY, NM	
12. CHECK APP	ROPRIATE BOX(ES) TO INDICA	ATE NATURE OF	NOTICE, REP	ORT, OR OTHER	DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
☐ Notice of Intent	☐ Acidize ☐	Deepen '	□ Production	(Start/Resume)	☐ Water Shut-Off `
	☐ Alter Casing ☐ Fracture Treat ☐ Re		Reclamati	mation	
Subsequent Report	☐ Casing Repair ☐	New Construction	□ Recomple	te	Other
Final Abandonment Notice	☐ Change Plans ☐	Plug and Abandon	□ Temporari	ly Abandon	Venting and/or Flari
:	☐ Convert to Injection ☐	Plug Back	■ Water Disposal		6
testing has been completed. Final At- determined that the site is ready for final Actual gas flared for this well 3 NOI Electronic Submission #2	3/1/14-6/1/14,	er all requirements, includ	ling reclamation, l		NSERVATION
March Total Flared = 0 mcf					DISTRICT
· April Total Flared = 188 mcf			•		9 2015
May Total Flared = 3,075 mcf		ACCOP!	NMOCD	ord RECE	EIVED
14. 1 hereby certify that the foregoing is true and correct.  Electronic Submission #257566 verified by the BLM Well Information System  For COG OPERATING L.C., sent to the Carlsbad  Committed to AFMSS for processing by JANIE RHOADES on 08/3//2015 (14AXM0068SE)  Name(Printed/Typed) BRIAN MAIORINO  Title ALITHORIZED/REPRESEMAN (108RD)					
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Signature (Electronic S	ubmission)	Date 03/19/2	014		
	THIS SPACE FOR FEDE	RAL OR STATE	PFFIREVUSE	1/674 1/6	
Approved By Conditions of approval, if any, are attached ertify that the applicant holds legal or equ	or	CARLSBAD	D MANAGEMENT TELD OFFICE	Date	
hich would entitle the applicant to condu	ct operations thereon. U.S.C. Section 1212, make it a crime for a	Office		to any danastrona s	annu de tha United
States any false, fictitious or fraudulent s	tatements or representations as to any matt	er within its jurisdiction.	Timony to make		generol the Officer