UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

5, Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS on ot use this form for proposals to drill or to re-enter an

NMNM115411	

Do not use thi abandoned wel	6	6. If Indian, Allottee or Tribe Name						
SUBMIT IN TRII	7	7. If Unit or CA/Agreement, Name and/or No.						
1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Oth	8	8. Well Name and No. REALLY SCARY FEDERAL 1						
Name of Operator COG OPERATING LLC	9	9. API Well No. 30-015-35741-00-S1						
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3 F	b. Phone No. (include area code) Ph: 575-748-6940) 1	10. Field and Pool, or Exploratory UNKNOWN WILLOW LAKE-BONE SPRING, SE				
4. Location of Well (Footage, Sec., T.	, R., M., or Survey Description)		11. County or Parish, and State					
Sec 33 T24S R28E SESE 540	FSL 355FEL			EDDY COUNTY, NM				
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA								
TYPE OF SUBMISSION		ТҮРЕ О	TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize	□ Deepen	□ Production	(Start/Resume)	☐ Water Shut-Off			
_	☐ Alter Casing	☐ Fracture Treat	☐ Reclamati	on	■ Well Integrity			
Subsequent Report	☐ Casing Repair	☐ New Construction	☐ Recomple	te	☑ Other Site Facility Diagra m/Security Plan			
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	□ Temporari	ly Abandon				
	☐ Convert to Injection	☐ Plug Back	☐ Plug Back ☐ Water Disposal					
following completion of the involved testing has been completed. Final At determined that the site is ready for f Attached is an updated Site F	operations. If the operation result andomnent Notices shall be filed inal inspection.) acility Diagram.	ts in a multiple completion or reconly after all requirements, included	if file with BLM/BIA. Required subsequent reports shall be filed within 30 days to completion or recompletion in a new interval, a Form 3160-4 shall be filed once requirements, including reclamation, have been completed, and the operator has shall be filed once requirements, including reclamation, have been completed. ENTERED 2/3/12 INTO AFMSS					
Accepted for record	17 Anprox	al Subject to Onsite 2/8/17			المنظم الإنكساء والدياد وال			
Accepted for record - NM	Mare:_		- SIA DISTRICT					
Accepted to tech 4-11-17 Date:								
14. I hereby certify that the foregoing is true and correct. Electronic Submission #353441 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 10/04/2016 (17PP0013SE)								
Name (Printed/Typed) AMANDA	AVERY	Title AUTHO	Title AUTHORIZED REPRESENTATIVE					
Signature (Electronic S		Date 10/04/2						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE								
Approved By		Title EV	PS.LIE		2 3 17 Date			
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conductive the conductive the applicant to conductive the applicant the applicant to conductive the applicant to conductive the applicant the applicant to conductive the applicant to	iitable title to those rights in the su							
Title 19 II C C Section 1001 and Title 42	H.O.C. O4: 12121 '4'	6 1 1	d willfully to make	4 4 4	64 77 1			

