

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
ArtesiaFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.
NMNM0553777

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 27. If Unit or CA/Agreement, Name and/or No.
NMNM1249471. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
GRAVE DIGGER FEDERAL COM 1H2. Name of Operator
COG OPERATING LLCContact: SANDY BALLARD
E-Mail: sballard@concho.com9. API Well No.
30-015-376653a. Address
600 W. ILLINOIS AVE
MIDLAND, TX 797013b. Phone No. (include area code)
Ph: 432-685-437310. Field and Pool or Exploratory Area
N.SEVEN RIVERS-GLOR-YESO

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 2 T20S R25E 330FNL 380FWL

11. County or Parish, State

EDDY COUNTY ~~COUNTY~~, NM**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Venting and/or Flaring
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Grave Digger Federal Com #1H Battery

Actual gas flared for this battery for 6/13/16 to 9/11/16 is as follows:
(Permit approval: Electronic Submission#341533)

June

Total for Battery = 0 mcf

July

Total for Battery = 225 mcf

Aug

Total for Battery = 230 mcf

Sep

Total for Battery = 0 MCF

NM OIL CONSERVATION
ARTESIA DISTRICT

JUL 19 2017

RECEIVED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #370763 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH MCKINNEY on 03/23/2017 ()

Name (Printed/Typed) SANDY BALLARD

Title ADMINISTRATIVE ASSISTANT

Signature (Electronic Submission)

Date 03/23/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE**ACCEPTED FOR RECORD**

Approved By: DAVID R. GLASS JUL 13 2017	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #370763 that would not fit on the form

32. Additional remarks, continued

Number of wells to flare: (2)

Grave Digger Federal Com #1H API# 30-015-37665

Grave Digger Federal Com #5H API# 30-015-40412

Reason for flare: DCP's short notice shut ins.