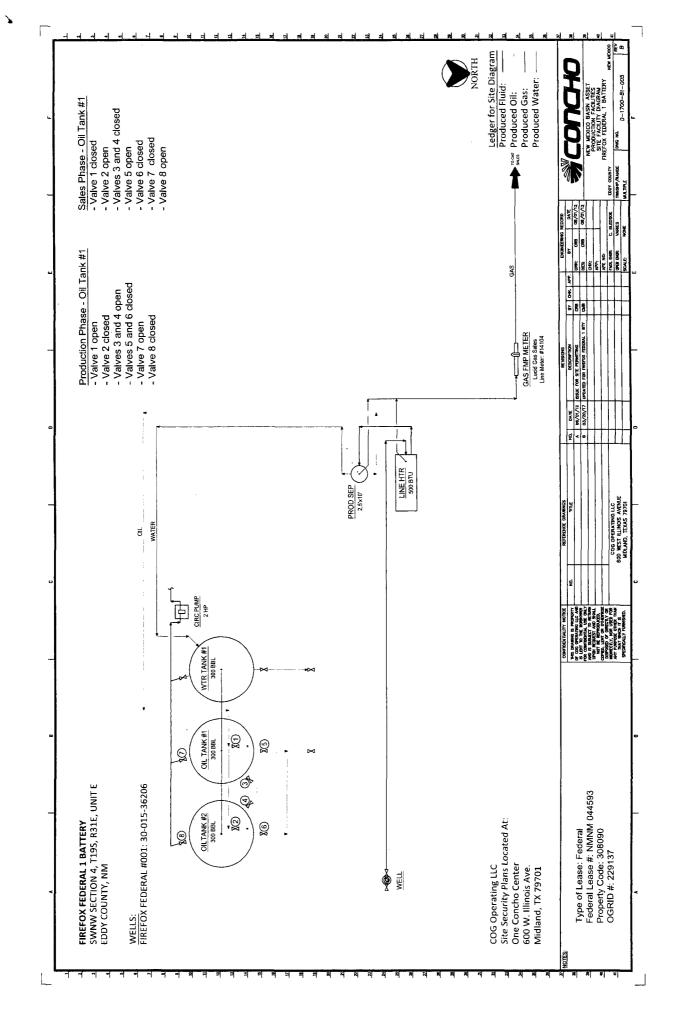
Fo:vn 3160-5 (June 2015)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT			OCD Artesia					
	SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				<ol> <li>Lease Serial No. NMNM44593</li> <li>If Indian, Allottee or Tribe Name</li> </ol>				
SUBMIT IN TRIPLICATE - Other instructions on page 2						7. If Unit or CA/Agreement, Name and/or No.			
	_	RIPLICATE - Other Inst	ructions on pa	ge z					
1. Type of Well Oil Well 🛛 Gas Well 🗋 Other						8. Well Name and No. FIREFOX FEDERAL 1			
2. Name of Operator Contact: AMANDA AVERY COG OPERATING LLC E-Mail: aavery@concho.com						9. API Well No. 30-015-36206			
3a. Address         3b. Phone No. (in           2208 W MAIN STREET         Ph: 575-748-6           ARTESIA, NM 88210         Ph: 575-748-6									
4. Location of V	)	11. County or Parish, State							
Sec 4 T19		EDDY COUNTY, NM							
12	2. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICATI	E NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA		
TYPE OF	E OF SUBMISSION TYPE OF ACTIO					N			
Notice of	f Intent	Acidize	🗖 Deepe	n	Product	ion (Start/Resume)	U Water Shut-Off		
		Alter Casing	Hydraulic Fracturing		Reclamation		Well Integrity		
🛛 Subsequent Report		Casing Repair	New Construction		C Recomplete		🛛 Other Site Facility Diagra		
Final Abandonment Notice		Change Plans	Plug and Abandon		Temporarily Abandon		m/Security Plan		
		Convert to Injection	🗖 Plug B	lack		Disposal			
testing has be determined t	een completed. Final At hat the site is ready for fi e attached Site Faci	•	ed only after all rec	quirements, includ	ing reclamatio	n, have been completed	and the operator has		
		,		Act	cented for	Record Purpos	es.		
	Approval						Subject to Onsite Inspection.		
			,	-	-	•			
DC A constant	2-27-18	, PLOLOD; NOTESIAD	-SRICT	مرد مندينين مرد مندينين	<u></u>				
		4EB 26	2007						
		RECEI	Ver	the grant of the second se					
14. I hereby cer	rtify that the foregoing is	true and correct. Electronic Submission # For COG C Committed to AFMSS for	371137 verified I	by the BLM We	II Information arisbad	n System (20/2017 ()			
Name (Printed/Typed) AMANDA AVERY				Title AUTHORIZED REPRESENTATIVE					
							<u></u>		
Signature	(Electronic S	Submission)							
		THIS SPACE FO	DR FEDERAL	OR STATE	OFFICE U	SE			
Approved By			Title			Date			
Conditions of app certify that the ap	plicant holds legal or equ	d. Approval of this notice does itable title to those rights in th	not warrant or e subject lease						
Title 18 U.S.C. Se	tle the applicant to condu- ection 1001 and Title 43	U.S.C. Section 1212, make it a	crime for any pers	Office on knowingly and	willfully to m	ake to any department or	agency of the United		
		statements or representations as	to any matter with	in its jurisdiction.					
Instructions on p	** OPERA1	OR-SUBMITTED ** O	PERATOR-S	UBMITTED *	* OPERAT	OR-SUBMITTED	**		



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