

UNITED STATES

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 20

(June 2015)		EPARTMENT OF THE INTERIOR			OMB NO. 1004-0137 Expires: January 31, 2018	
9	BUREAU OF LAND MANA UNDRY NOTICES AND REPO	MLC029020				
Do n	6. If Indian, Allottee or Tribe Name					
aband	loned well. Use form 3160-3 (AF				- 1/ N	
SU	BMIT IN TRIPLICATE - Other ins	tructions on page 2		7. If Unit or CA/Agree	ement, Name and/or No.	
1. Type of Well ☑ Oil Well ☐ Gas W	8. Well Name and No. CARMEN 3 FEDERAL COM 13H					
2. Name of Operator COG OPERATING I	9. API Well No. 30-015-43644					
3a. Address 600 W ILLINOIS AV MIDLAND, TX 7970		3b. Phone No. (include area Ph: 432-685-4332	Phone No. (include area code) 432-685-4332		10. Field and Pool or Exploratory Area LOCO HILLS;GLORIETA YESO	
4. Location of Well (Foo	tage, Sec., T., R., M., or Survey Description	11. County or Parish, State				
	ler NMP 1650FNL 150FEL	EDDY COUNTY, NM				
12. CHECK	K THE APPROPRIATE BOX(ES)) TO INDICATE NATU	RE OF NOTICE	E, REPORT, OR OTH	HER DATA	
TYPE OF SUBMISS	SION	TYPE OF ACTION				
☐ Notice of Intent	☐ Acidize	□ Deepen	☐ Produ	ction (Start/Resume)	■ Water Shut-Off	
_	☐ Alter Casing	☐ Hydraulic Fractu	iring 🔲 Reclai	nation	■ Well Integrity	
Subsequent Report	☐ Casing Repair	☐ New Construction	_	-	☑ Other Site Facility Diagra m/Security Plan	
☐ Final Abandonment		☐ Plug and Aband		orarily Abandon		
	Convert to Injection			Disposal		
If the proposal is to deep Attach the Bond under w following completion of testing has been complet determined that the site is	en directionally or recomplete horizontally hich the work will be performed or provid the involved operations. If the operation red. Final Abandonment Notices must be fis ready for final inspection.	r, give subsurface locations and e the Bond No. on file with BL esults in a multiple completion	measured and true M/BIA. Required s or recompletion in	vertical depths of all pertinubsequent reports must be a new interval, a Form 316	nent markers and zones. Efiled within 30 days 50-4 must be filed once	
Please see attached	I facility diagram.					
		or Record Purposes.				
	bject to Onsite Inspection.					
PATERIAD STRICT Date: 2-14-18 DMCKinney						
<i>a.</i> 2	-22-18 4EB	26 200		many		
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~		CET C				
				FAC. IL	= CARM3	
14. I hereby certify that the	foregoing is true and correct. Electronic Submission a	#376791 verified by the BL	M Well Informati	on System		
	Committed to AFMSS for	OPERATING LLC, sent to processing by DEBORAH	the Carisbad MCKINNEY on 0	5/24/2017 ()		
Name (Printed/Typed)	KANICIA CASTILLO	Title PF	REPARER			
Signature	(Electronic Submission)	Date 05	/19/2017			
	THIS SPACE F	OR FEDERAL OR STA	ATE OFFICE	JSE		
Approved By		Tielo			Date	
Approved By Conditions of approval if any	, are attached. Approval of this notice doe	Title			Date	
certify that the applicant holds	legal or equitable title to those rights in the	ne subject lease				
which would entitle the applic	ant 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 statements or representations as to any matter within its jurisdiction.

