Form 3160-5 (June 2015)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

-	FORM APPROVED
	OMB NO. 1004-0137
	Expires: January 31, 2018
5.	Lease Serial No.
	NMNM115413 -

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.

6. If Indian, Allottee or Tribe Name

SUBMIT IN 1	7. If Unit or CA/Agree NMNM136117	ement, Name and/or No.						
1. Type of Well Gas Well Oth			8. Well Name and No. ADMIRAL FEDER	AL COM 2H				
2. Name of Operator COG OPERATING LLC	ERY		9. API Well No. 30-015-42820	-				
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210	3b. Phone No Ph: 575-74	(include area code) 8-6940		10. Field and Pool or Exploratory Area WILDCAT				
4. Location of Well (Footage, Sec., T.			11. County or Parish, State					
Sec 28 T25S R29E SWSE 19			EDDY COUNTY	7, NM -				
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA								
TYPE OF SUBMISSION	TYPE OF ACTION							
☐ Notice of Intent	☐ Acidize	□ Deepen □ Pro		☐ Product	ion (Start/Resume)	■ Water Shut-Off		
	☐ Alter Casing	☐ Hyd	raulic Fracturing	☐ Reclama	ation	■ Well Integrity		
Subsequent Report     ■	Casing Repair	□ Nev	Construction	□ Recomp	lete	Other		
☐ Final Abandonment Notice	□ Change Plans	☐ Plug and Abandon ☐ Temp		□ Tempor	arily Abandon	Site Facility Diagra m/Security Plan		
	☐ Convert to Injection	🗖 Plug	Back	☐ Water D	Disposal	•		
following completion of the involved operations. If the operation results in a multiple completion 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.  Please see attached Site Facility Diagram.  Accepted for Record Purposes.  Approval Subject to Onsite Inspection.  Date: 2-14-18  Accepted for record - NECCO ABB 2 6 2000  Fac ID = ADFC2H  Fac ID = ADFC2H								
14. I hereby certify that the foregoing is true and correct.  Electronic Submission #372896 verified by the BLM Well Information System  For COG OPERATING LLC, sent to the Carlsbad  Committed to AFMSS for processing by DEBORAH MCKINNEY on 04/20/2017 ()								
Name (Printed/Typed) AMANDA	Title AUTHO	RIZED REP	PRESENTATIVE					
Signature (Electronic Submission)			Date 04/13/20	017				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE								
Approved By	Title	····	·	Date				
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conductive the conductive transfer of the conductive t	Office							
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a tatements or representations as	crime for any pe to any matter w	erson knowingly and ithin its jurisdiction.	willfully to ma	ake to any department or	agency of the United		

