A . F % 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. NMLC028793A

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 TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No. NMNM88525X	
1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Ot			8. Well Name and No. BURCH KEELY UNIT 966H			
Name of Operator COG OPERATING LLC	STILLO		9. API Well No. 30-015-44067-00-X1			
			Phone No. (include area code) 432-685-4332		10. Field and Pool or Exploratory Area BURCH KEELY-GLORIETA-UPPER Y	
4. Location of Well (Footage, Sec.,			11. County or Parish, State			
Sec 19 T17S R30E Lot 8 195 32.818165 N Lat, 104.01870			EDDY COUNTY, NM			
12. CHECK THE A	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA
TYPE OF SUBMISSION	TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize ☐		pen	☐ Producti	ion (Start/Resume)	□ Water Shut-Off
	☐ Alter Casing	□ Нус	raulic Fracturing	☐ Reclamation		■ Well Integrity
Subsequent Report	□ Casing Repair	□ Nev	Construction	☐ Recomplete		Other
☐ Final Abandonment Notice	☐ Change Plans	Plug	and Abandon	☐ Tempor	porarily Abandon Site Facility Diag m/Security Plan	
	☐ Convert to Injection	Plug	Back	☐ Water Disposal		
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. Please see attached facility diagram. Accepted for Record Purposes. Approval Subject to Onsite Inspection. Pate: EB 26 200 CHCEIVEI 14. I hereby certify that the foregoing is true and correct.						
Electronic Submission #386217 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 10/02/2017 (18PP0002SE) Name (Printed/Typed) KANICIA CASTILLO Title PREPARER						
2, 7, 12, 11, 11, 11, 11, 11, 11, 11, 11, 11						
Signature (Electronic Submission)			Date 08/25/2	017		
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE U	SE	
Approved By			Title			Date
Conditions of approval, if any, are attached that the applicant holds legal or equivalent would entitle the applicant to cond	Office					
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent				willfully to ma	ake to any department or	agency of the United

