Form 3160-5 (June 2015)

UNITED STATES

FORM APPROVED OMB NO. 1004-0137

SUBMIT IN TRIPLICATE - Other Instructions on page 2 1. Type of Well SUBMIT IN TRIPLICATE - Other Instructions on page 2 1. Type of Well Oil Well Gas Well Other 1. Type of Well Oil Well Gas Well Other Contact: CATHY SEELY COG O'PERTING LLC E-Mail: cseely@concho.com 30-015-37480	BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS A resia			Expires: January 31, 2018	
SUBMIT IN TRIPLICATE - Other instructions on page 2 7. If Unit or CA/Agreement, Name and/or No. SUBMIT IN TRIPLICATE - Other instructions on page 2 8. Well Name and No. SHOWSTOPPER 19 FED COM 6H 8. Well Name and No. SHOWSTOPPER 19 FED COM 6H 9. API Well No. Compared to the Compared of Contact: CATHY SEELY COG OPERATING LLC 13. Address 2208 W MAIN STREET ARTESIA, NM 88210 14. Location of Well (Footage, Sec., T., R., M., or Survey Description) 15. Friend and Pool or Exploratory Area WILLOW LAKE BONE SPRING 16. Location of Well (Footage, Sec., T., R., M., or Survey Description) 17. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 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 depend directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Sellowing completion of the involved operations. If the operations cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completion of the involved operations. If the operation cents is an antilize completio					
Type of Well	Do not use this form for proposals to drill or to re-enter and abandoned well. Use form 3160-3 (APD) for such proposals.		6. If Indian, Allotte	e or Tribe Name	
Soil Well Gas Well Other SHOWSTOPPER 19 FED COM 6H	SUBMIT IN TRIPLICATE - Other instructions on page 2			greement, Name and/or No.	
2. Name of Operator COG OPERATING LLC E-Mail: cseely@concho.com 3a. Address 2208 W MAIN STREET ARTESIA, NM 88210 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 5. Phone No. (include area code) Ph: 575-748-1549 10. Field and Pool or Exploratory Area WILLOW LAKE BONE SPRING ARTESIA, NM 88210 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 5. Sec. 19 TZSS R29E SWSW 330FSL 776FWL 32.109080 N Lat, 104.029640 W Lon 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					
30-015-37480 3a. Address 2208 W MAIN STREET ARTESIA, NM 882/10 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 19 T25S R29E SWSW 330FSL 775FWL 32.109080 N Lat, 104.029640 W Lon 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent					
2208 W MAIN STREET ARTESIA, MM 88210 4. Location of Well (Footage, Sec., T. R., M., or Survey Description) Sec 19 T25S R29E SWSW 330FSL 775FWL 32.109080 N Lat, 104.029640 W Lon 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent	COG OPERATING LLC E-Mail: cseely@concho.com		30-015-37480		
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32.109080 N Lat, 104.029640 W Lon 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent	4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		11. County or Parish, State		
TYPE OF SUBMISSION Notice of Intent				EDDY COUNTY, NM	
Notice of Intent	12. CHECK THE APPROPRIATE BOX	(ES) TO INDICATE NATURE O	F NOTICE, REPORT, OR O	THER DATA	
Notice of Intent	TYPE OF SUBMISSION	TYPE OF ACTION			
Alter Casing Hydraulic Fracturing Reclamation Well Integrity Casing Repair New Construction Recomplete Other Venting and/or Fl Change Plans Plug and Abandon Temporarily Abandon Temporarily Abandon Temporarily Abandon Plug Back Water Disposal Convert to Injection Plug Back Water Disposal 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 BLMBIA. 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 only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection. ACTUAL GAS FLARED AT THE SHOWSTOPPER 19 FED COM 6H BTY FROM 11/2/17 TO 1/31/18. WELLS: SHOWSTOPPER 19 FED COM 6H: 30-015-37480 NOVEMBER: 50 MCF DECEMBER: 2529 MCF JANUARY: 2205 MCF APR 0 3 2018 ACTESIA DISTRICT APR	□ Notice of Intent	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off	
Gasing Repair Gasing Repai	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation	■ Well Integrity	
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 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. ACTUAL GAS FLARED AT THE SHOWSTOPPER 19 FED COM 6H BTY FROM 11/2/17 TO 1/31/18. WELLS: SHOWSTOPPER 19 FED COM 6H: 30-015-37480 NOVEMBER: 50 MCF DECEMBER: 2529 MCF JANUARY: 2205 MCF APR 0 3 2018 The CIL CONSERVATION APR 0 3 2018 APR 0 3 2018 The CIL CONSERVATION APR 0 3 2018 APR 0 3 2018 The CIL CONSERVATION APR 0 3 2018 The CIL CONSE	☑ Subsequent Report ☐ Casing Repair		□ Recomplete		
Convert to Injection Plug Back Water Disposal	☐ Final Abandonment Notice ☐ Change Plans	Plug and Abandon	□ Temporarily Abandon	-	
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. ACTUAL GAS FLARED AT THE SHOWSTOPPER 19 FED COM 6H BTY FROM 11/2/17 TO 1/31/18. NOI SUBMISSION #393778 WELLS: SHOWSTOPPER 19 FED COM 6H: 30-015-37480 NOVEMBER: 50 MCF ARTESIA DISTRICT APR 0 3 2018 JANUARY: 2205 MCF APR 0 3 2018 JANUARY: 2205 MCF APR 0 3 2018 JANUARY: 2205 MCF APR 0 3 2018 JANUARY: BECEIVED 14. Thereby certify that the foregoing is true and correct. Electronic Submission #407532 verified by the BLM Well Information System	Convert to Inject	ction	■ Water Disposal		
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For COG OPERATING LLC, sent to the ¢arlsbad // // //	Electronic Submiss	ion #407532 verified by the BLM We	I Information System		
Committed to AFMSS for processing by JENNIFER SANCHEZ on 03/14/2018 ()	Committed to AFMS	S for processing by JENNIFER SAN	CHEZ on 03/14/2018 () //	\ / //	
Name (Printed/Typed) CATHY SEELY Title ENGINEERING TECH	Name (Printed/Typed) CATHY SEELY	Title ENGIN		CORN //	
Signature (Electronic Submission) Date 03/13/2018	Signature (Electronic Submission)	Date 03/13/2			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	THIS SPAC	E FOR FEDERAL OR STATE	OFFICE USE		
Approved By Title	Approved Dry	Title		V V V V V V V V V V V V V V V V V V V	
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	Conditions of approval, if any, are attached. Approval of this notic certify that the applicant holds legal or equitable title to those rights	e does not warrant or s in the subject lease	BURFAU OF LAND MADE	MENT CE	
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				- X -1-1-	