

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM2933 ✓
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com		7. If Unit or CA/Agreement, Name and/or No. NMNM82041X ✓
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-685-4332	8. Well Name and No. ETZ STATE UNIT 100
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T17S R30E NWNE Tract 1 660FNL 1980FEL		9. API Well No. 30-015-20598-00-S1
		10. Field and Pool or Exploratory Area GRAYBURG
		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 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 NOI/Subsequent sundry notices that were sent and approved by the OCD.

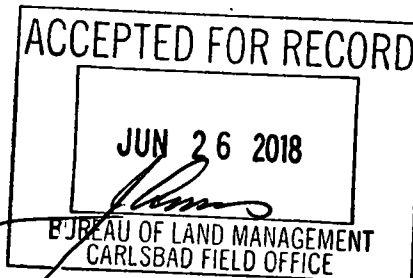
NM OIL CONSERVATION
ARTESIA DISTRICT

JUN 29 2018

RECEIVED

RECLAMATION
DUE 8-1-18

RECLAMATION PROCEDURE
ATTACHED



14. I hereby certify that the foregoing is true and correct. Electronic Submission #423588 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 06/12/2018 (18DLM0362SE)	
Name (Printed/Typed) KANICIA CASTILLO	Title PREPARER
Signature (Electronic Submission)	Date 06/12/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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 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 States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Submit & Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-20598
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-2933
7. Lease Name or Unit Agreement Name ETZ State Unit
8. Well Number 100
9. OGRID Number
10. Pool name or Wildcat Grbg Jackson-SR-Q-GRBG-SA

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator COG Operating, LLC	
3. Address of Operator 600 W. Illinois Ave, Midland, TX 79701	
4. Well Location Unit Letter B : 660 feet from the N line and 1980 feet from the E line Section 17 Township 17S Range 30E NMPM County Eddy	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3673' GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

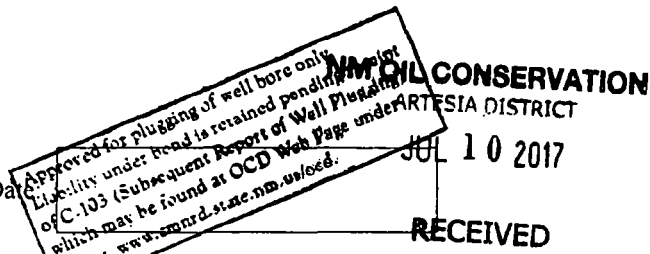
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

06/26/17 MIRU Plugging equipment. Dug out cellar, POH w/ 153 3/4" rods. ND Well head, NU BOP. POH w/ 123 jts of 2 3/8 tbg. 06/27/17 RIH to 2900', no tag. Set 4 1/2" CIBP @ 2500'. Spotted 40 sx class C cmt w/ 2% CACL @ 2500 & displaced to 1922'. WOC. Tagged plug @ 1922'. Circulated hole w/ mud laden fluid. Perf'd csg @ 1050'. Sqz'd 30 sx class C cmt w/ 2% CACL @ 1050 & displaced to 950'. WOC. Tagged plug @ 950'. Perf'd csg @ 530'. Sqz'd 50 sx class C cmt @ 530 & displaced to 130'. WOC. 06/28/17 Tagged plug @ 300'. Perf'd csg @ 150'. Sqz'd 150 sx class C cmt @ 150' & circulated to surface. Rigged down and moved off. Moved in backhoe and welder. Dug out cellar. Cut off well head. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Cut off deadmen. Cleaned location, moved off.

Spud Date:

Rig Release Date:



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Lead Regulatory Analyst DATE 7/5/17
Type or print name Konica Castillo E-mail address: KCastillo@conoh.com PHONE: 432-485-4332
For State Use Only
APPROVED BY: [Signature] TITLE COMPLIANCE OFFICER DATE 7/10/2017
Conditions of Approval (if any):

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161

1625 N. French Dr., Hobbs, NM 88240

District II - (575) 744-8833

811 S. First St., Artesia, NM 88210

District III - (505) 334-6178

1000 Rio Brazos Rd., Aztec, NM 87410

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103

October 13, 2009

RECEIVED
MAR 20 2017
ARTESIA DISTRICT
OIL CONSERVATION

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-015-20598

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

NM-2933

7. Lease Name or Unit Agreement Name

ETZ State Unit

8. Well Number 100

9. OGRID Number

229137

10. Pool name or Wildcat

Grbg Jackson-SR-Q-GRBG-SA

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

COG Operating, LLC

3. Address of Operator

600 W. Illinois Ave, Midland, TX 79701

4. Well Location

Unit Letter B : 660 feet from the N line and 1980 feet from the E line
Section 17 Township 17S Range 30E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3673' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. Tag CIBP @ 2797. Spot 25 sx cmt @ 2505-2405'.

2. Set 4 1/2 CIBP @ 2505. Circulate hole w/ mud laden fluid. Pressure test csg. Spot 25 sx cmt @ 2505-2405'. - WOC & TAG

3. Spot 25 sx cmt @ 2100-2000'. (Queen)

4. Perf & Sqz 30 sx cmt @ 1050-950'. (B/Salt) WOC & TAG

5. Perf & Sqz 80 sx cmt @ 580-Surface. (T/Salt & Shoe) - 530'

6. Cut off well head, verify cmt to surface, weld on dry hole marker.

Spud Date:

Rig Release Date:

WELL MUST BE PLUGGED BY 3/20/2018

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Abigail Montgomery TITLE Agent

DATE 3-17-17

Type or print name

Abigail Montgomery

E-mail address:

abbym@bernandassociates.com

PHONE:

432-580-7161

For State Use Only

APPROVED BY:

Robert J. Byrd

TITLE

COMPLIANCE OFFICER

DATE

3/20/17

Conditions of Approval (if any):

★ SEE ATTACHED COA-5

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms: www.comred.state.nm.us/oed.