' Form 3180-5 (June 2015)

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

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

Lease Serial No. NMLC028784B

|                 |                | <b>REPORTS ON</b>   |             |
|-----------------|----------------|---------------------|-------------|
| Do not use this | form for propo | sals to drill or to | re-enter an |
|                 | 11 6 0404      | A A /A DDI 4        |             |

| 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 Gas Well Other   |                                      |                         |                              |                 | 8. Well Name and No.<br>BURCH KEELY UNIT 23            |                            |  |  |
| 2. Name of Operator Contact: DANA KING COG OPERATING LLC E-Mail: dking@concho.com  |                                      |                         |                              |                 | 9. API Well No.<br>30-015-20417-00-S1                  |                            |  |  |
| 3a. Address 3b. Phone No. Ph: 432-819 3b. Phone Ph: 432-81 |                                      |                         | (include area code)<br>-2267 |                 | 10. Field and Pool or Exploratory Area GRAYBURG        |                            |  |  |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)   |                                      |                         |                              |                 | 11. County or Parish, State                            |                            |  |  |
| Sec 18 T17S R30E NESW 1980FSL 1894FWL  |                                      |                         |                              |                 | EDDY COUNTY, NM  |                            |  |  |
| 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  |                                      |                         |                              |                 |  |                            |  |  |
| TYPE OF SUBMISSION   |                                      |                         |                              |                 |  |                            |  |  |
| Notice of Intent   | ☐ Acidize                            | Deep                    | □ Deepen                     |                 | on (Start/Resume)                                      | ■ Water Shut-Off           |  |  |
| _  | ☐ Alter Casing                       |                         | aulic Fracturing             | ☐ Reclama       |  | ■ Well Integrity           |  |  |
| ☐ Subsequent Report  | ☐ Casing Repair                      | _                       | Construction                 | Recomp          |  | Other Venting and/or Flari |  |  |
| ☐ Final Abandonment Notice   |                                      |                         | ·                            |                 | rarily Abandon ng                                      |                            |  |  |
| ☐ Convert to Injec   |                                      |                         |                              |                 | 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.   |                                      |                         |                              |                 |  |                            |  |  |
| COG OPERATING RESPECTFULLY REQUESTS TO FLARE AT THE BURCH KEELY UNIT 18B BATTERY, S19 T17S R30E.   |                                      |                         |                              |                 |  |                            |  |  |
| NUMBER OF WELLS TO FLARE: 25   |                                      |                         |                              |                 |  |                            |  |  |
| BURCH-KEELY UNIT 23 30-015-20417 BURCH-KEELY UNIT 25 30-015-23168 BURCH-KEELY UNIT 27 30-015-04189 BURCH-KEELY UNIT 28 30-015-04188 BURCH-KEELY UNIT 257 30-015-29035 BURCH-KEELY UNIT 275 30-015-29774 BURCH-KEELY UNIT 297 30-015-30731 BURCH-KEELY UNIT 303 30-015-30789  ACCEPTED TO TECOTO  |                                      |                         |                              |                 |  | 2 2018                     |  |  |
| 14. I hereby certify that the foregoing is true and correct.  Electronic Submission #444590 verified by the BLM Well Information System  For COG OPERATING LLC, sent to the Carlsbad  Committed to AFMSS for processing by PRISCILLA PEREZ on 11/29/2018 (19PP0422SE)  |                                      |                         |                              |                 |  |                            |  |  |
| Name (Printed/Typed) DANA KING   |                                      | itle SUBMITTING CONTACT |                              |                 |  |                            |  |  |
| Signature (Electronic S  | ature (Electronic Submission)        |                         |                              | 018             |  |                            |  |  |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE   |                                      |                         |                              |                 |  |                            |  |  |
| Approved By /s/ Jonathon Shepard Title   |                                      |                         |                              |                 |  | NOV 2 9 2018               |  |  |
| Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conductive the applicant to conduct the applicant the appl | sitable title to those rights in the |                         | <u>Carlsb</u>                | eum E<br>ad Fie | ngineer<br>Id 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.

## Additional data for EC transaction #444590 that would not fit on the form

### 32. Additional remarks, continued

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BURCH-KEELY UNIT 329 30-015-32426 BURCH-KEELY UNIT 347 30-015-32899 BURCH-KEELY UNIT 351 30-015-32785 BURCH-KEELY UNIT 351 30-015-32787 BURCH-KEELY UNIT 382 30-015-33811 BURCH-KEELY UNIT 396 30-015-33810 BURCH-KEELY UNIT 404 30-015-35434 BURCH-KEELY UNIT 416 30-015-37128 BURCH-KEELY UNIT 570 30-015-40267 BURCH-KEELY UNIT 570 30-015-40268 BURCH-KEELY UNIT 573 30-015-40269 BURCH-KEELY UNIT 573 30-015-39539 BURCH-KEELY UNIT 582 30-015-39539 BURCH-KEELY UNIT 583 30-015-39540 BURCH-KEELY UNIT 583 30-015-39540 BURCH-KEELY UNIT 586 30-015-39908 BURCH-KEELY UNIT 586 30-015-39908 BURCH-KEELY UNIT 941H 30-015-40971
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REQUESTING 90 DAY FLARE FROM: 11/29/2018 THROUGH 2/27/2019

BOPD 70 MCFD 600

REASON: UNPLANNED MIDSTREAM CURTAILMENT

PLANT SHUT DOWN DUE TO HLP OR PLANT MAINTENANCE

## **BUREAU OF LAND MANAGEMENT**

Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

# **Conditions of Approval to Flare Gas**

- 1. Approval not to exceed 180 days from date of submission.
- 2. All flaring under this request is considered to be "avoidably lost" per 43 CFR 3179.4(a)(2)(i iii). Volumes for avoidably lost gas shall be reported on OGOR "B" reports as disposition code "33".

### **Exceptions:**

- a. The first 24 hours of a temporary emergency flare is considered "unavoidably lost" and is therefore royalty free (43 CFR 3179.103(a)). Flared volumes that are considered unavoidably lost are not to be included in Sundry Notice (Form 3160-5). These Volumes are not royalty bearing and shall be reported on OGOR "B" as either disposition code "21" or "22".
- b. If the operator believes that the flared volumes were "unavoidably lost", the operator can submit a request via Sundry Notice (Form 3160-5) with justification for an exception in accordance with 43 CFR 3179.4, 3179.101 3179.104.