Form 3160-5 (August 2007)

(Instructions on page 2)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

5. Lease Serial No. NMNM 98

6. If Indian, Allottee or Tribe Name

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

abandoned well. Use Form 3160-3 (APD) for such proposals.							·	
SUBMIT IN TRIPLICATE Other instructions on page 2.					7. If Unit of CA/A	greement, i	Name and/or No.	
1. Type of Well								
☑ Oit Well ☐ Gas V		8. Well Name and No. Cabo Wabo Federal COM 3H			3H			
2. Name of Operator COG Production, LLC			9. API Well No. 30-015-42507					
3a. Address			(include area co	de)		0. Field and Pool or Exploratory Area		
			443 Willow Lake			ke; Bone Spring		
4. Location of Well (Footage, Sec., T., Unit Letter I, Section 25, 125E, R29E	11. Country or Pa Eddy County			arish, State				
12. CHEC	CK THE APPROPRIATE BO	OX(ES) TO IND	ICATE NATUR	E OF NOTIC	E, REPORT OR O	THER DA	ГА	
TYPE OF SUBMISSION			TY	PE OF ACTI	ION			
✓ Notice of Intent	Acidize Alter Casing	Deep	en ure Treat		iction (Start/Resume)	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	Casing Repair New Construction Recomplete		nplete	$\overline{\mathbf{Z}}$	Other		
	Change Plans	Change Plans Plug and Al		Abandon Temporarily Abandon			Remediation	
Final Abandonment Notice	Convert to Injection	Plug .	Back	Water Disposal				
On May 17, 2019, a release occurre pasture. A vacuum truck was disparted to excavate the impaspill guidelines. Once completed, a surface of the completed of the complete of t	tched to remove all freest cted areas in the pasture a report will be submitted for	anding fluids. farea at risk. Tor your review.	The spill footpri	nt area is sh will be perfo	own the KMZ file	for your re	oview.	
Analyticals, a	te.					NM C	DIL CONSERVATION ARTESIA DISTRICT	
14. I hereby certify that the foregoing is t	rue and correct. Name (Printe	d(Typed)		· · · · · · · · · · · · · · · · · · ·		<u> </u>	AUG 2 1 2019	
lke Tavarez				Title Senior HSE Supervisor				
Signature M			Date 8-8-19			RECEIVED		
1	THIS SPACE	FOR FEDE	RAL OR ST	ATE OFF	ICE USE			
Approved by Conditions of approval, if any, are attached that the applicant holds legal or equitable to the applicant to conduct operations. Title 18 U.S.C. Section 1001 and Title 43	itle to those rights in the subje- thereon.	ct lease which wo	uld Office	CFE CFO nd willfully to		Date	8-8-19	
ficultious or fraudulent statements of repre				io willing to	make to any depart	nem or agen	icy of the United States any false,	