

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

JUL 16 2008

FORM APPROVED  
OMB NO. 1004-0135  
Expires July 31, 2010**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.*

OCD-ARTESIA

5 Lease Serial No.  
NMLC029342B

6 If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

7. If Unit or CA/Agreement, Name and/or No

1 Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.

POLARIS B FEDERAL 19

2 Name of Operator

COG OPERATING LLC

Contact: KANICIA R CARRILLO

E-Mail: kcarrillo@conchoresources.com

9 API Well No

30-015-35966-00-X1

3a. Address

550 W TEXAS, STE 1300 FASKEN TOWER II  
MIDLAND, TX 79701

3b. Phone No. (include area code)

Ph: 432-685-4332

10. Field and Pool, or Exploratory  
LOCO HILLS

4 Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 17 T17S R30E SENW 1800FNL 2310FWL

11. County or Parish, and State

EDDY COUNTY, NM

## 12. CHECK 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"/> Fracture Treat   | <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 checked="" type="checkbox"/> Other |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | Well Spud                                 |
|   | <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 recomple 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

06/12/08 Spud 17-1/2" @ 5:30pm.

06/13/08 TD 17-1/2" @ 433'. Ran 9jts 13-3/8 H40 48# @ 432'. Cmt w/ 450sx, C. PD @ 11:00am. Circ 250sx. WOC 18hrs. Tested BOP to 2000# for 10 min, ok.

06/15/08 TD 11" @ 1312'.

06/16/08 Ran 29jts 8-5/8 J55 32# @ 1311'. Cmt w/400sx C, 200sx C. PD @ 11:15am. Circ 197sx. WOC 12hrs. Test BOP to 2000# for 10 min, ok.

06/22/08 TD 7-7/8" @ 5851'.

06/23/08 Ran 130jts 5-1/2 J55 17# @ 5850'. Cmt w/ 700sx C, 400sx C. PD @ 02:30pm. Circ 150sx. WOC 12hrs. Tested csg to 600# for 20min, ok. RR.

14. I hereby certify that the foregoing is true and correct

Electronic Submission #61295 verified by the BLM Well Information System

For COG OPERATING LLC, sent to the Carlsbad

Committed to AFMSS for processing by KURT SIMMONS on 07/09/2008 (08KMS2164SE)

Name (Printed/Typed) KANICIA R CARRILLO

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 07/08/2008

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

JAMES A AMOS  
Title SUPERVISOR EPS

Date 07/12/08

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 Carlsbad

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

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

Accepted for record - NMOCD