Form 3160- 5 (August, 2007)

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

OCD Artesia

FORM APPROVED OMB No. 1004-0137

Expires: July 31, 2010

Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS	ł	N
Do not use this form for proposals to drill or to re-enter an	6.	If Indian, Allottee
shandoned well. Use Form 3160-3 (APD) for such proposals	1	

NMNM114969 , or Tribe Name

abang	doned well. Use Form 3160)-3 (APD)	for such prop	osals.			<u> </u>		
SUBMIT IN TRIPLICATE - Other Instructions on page 2.					7. If Unit or CA	. Agreement Name a	nd/or No.		
1. Type of Well X Oil Well Gas Well Other				8. Well Name and No. "					
2. Name of Operator.	- A+					ırn Owl Federa	ıl #3H		
COG Operating LLC			DI S NI 10 I		9. API Well No	-			
3a. Address 2208 W. Main Street		3b.	Phone No. (includ	•		30-015-4128	33		
Artesia, NM_88210			575-74	48-6946	10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R.,	the state of the s	•		Lat.	Welch; Bone Spring				
SHL: 380' FSL & 1890' FWL			•	Long.	11. County or P	•	313.4		
BHL: 332' FNL & 1807' FWI					Edd	<u>y</u>	NM		
12. CHECK APPROPRIATE BOX	(S) TO INDICATE NATU	RE OF NO			DATA	<i>A</i> .			
TYPE, OF SUBMISSION		·	TY	PE OF ACTION			21		
Notice of Intent	. Acidize	Dec	epen	Production (S	start/ Resume)	Water Shut	<i>5</i> -		
e.	Altering Casing	Fra	cture Treat	Reclamation		Well Integri	ity		
X Subsequent Report	Casing Repair	Nev	v Construction	Recomplete		Other			
·. ·	Change Plans	Plug	g and abandon	Temporarily A	Abandon				
Final Abandonment Notice	Convert to Injection	Plu	g back	X Water Dispos	al		:		
Attach the Bond under which the following completion of the involve testing has been completed. Final determined that the site is ready for final Required Information for 1) Name of formation producing 2) Amount of water produced is 3) How water is stored on least 4) How water is moved to disp 5) Disposal Facility #1: a) Facility Operator Name: b) Name of facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility #2: a) Facility Operator Name: b) Name of facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility was: a) Facility Operator Name: b) Name of facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility #3: a) Facility Operator Name: b) Name of facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well: V d) Location by 1/4, 1/4, Sec Disposal Facility or well r d) Location by 1/4, 1/4, Sec Disposal Facility or well r d) Location by 1/4, 1/4, Sec Disposal Facility or well r d) Location by 1/4, 1/4, Sec Disposal Facility or well r d) Location by 1/4, 1/4, Sec Disposal Facility or well r d) Location by 1/4, 1/4, Sec Disposal Facility D) Location by 1/4	d operations. If the operation of Abandonment Notice shall be inspection.) the Disposal of Producting water on lease: Bone Spr. n barrels per day: 1500 BW: 2 - 500 bbl fiberglass tanknosal facility: Trucked COG Operating LLC name & number: SRO SWD VDW tion, Township & Range: SCOG Operating LLC name & number: West Brust VDW tion, Township & Range: SCOG Operating LLC name & number: West Brust VDW tion, Township & Range: SCOG Operating LLC name & number: West Brust VDW tion, Township & Range: SCOG Operating LLC name & number: West Brust VDW tion, Township & Range: Now West Brust VDW tion, Township & Range: Now West Brust VDW tion, Township & Range: Now West Brust VDW	esults in a filed only ed Water ing PD cs #101 (Or WNE, Sec hy 5 Feder ESE, Sec hy 8 Feder in a file of the second	ral SWD #1 (O	ion or recompletion ments, including recl	in a new interval, amantion, have be	CHED FOR	shall be filed once of the operator has shall		
Name (Printed/Typed)	,		Title:			•			
Stormi Davis			Regi	ulatory Analyst					
Signature Scan	ains		Date: 8/13				<u> </u>		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE									
Approved by:	2. Chan	•	Title:	EDS	ח	ate: 8-2.	<u> </u>		
Conditions of approval, if any are attach	T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1		nt or	, (, (,) ,)	. 10				
certify that the applicant holds legal or equitable title to those rights in the subject lease Office: which would entitle the applicant to conduct operations thereon.									
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 any department or agency of the United States any raise, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.									

BUREAU OF LAND MANAGEMENT Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

Disposal of Produced Water From Federal Wells Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

- 1. This agency shall be notified of any change in your method or location of disposal.
- 2. Compliance with all provisions of Onshore Order No. 7.
- 3. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- 5. All above ground structures on the lease shall be painted Shale Green (5Y 4/2), or as per approved APD stipulations. This is to be done within 90 days, if you have not already done so.
- 6. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
- 7. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
- 8. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.

9/22/09