

N.M. Oil Cons. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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 reverse side.

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

2. Name of Operator **COG Operating LLC**

3a. Address
550 W. Texas Ave., Suite 1300 Midland, TX 79701

3b. Phone No. (include area code)
432-685-4340

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

**2045' FSL & 705' FWL
Unit L, Sec 29, T23S, R30E**

OCT 19 2005

OUU-ARTESIA

5. Lease Serial No.
NM-92180

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
GOLD RUSH 29 FEDERAL #2

9. API Well No.
30-015-34081

10. Field and Pool, or Exploratory Area
NASH DRAW; DELAWARE

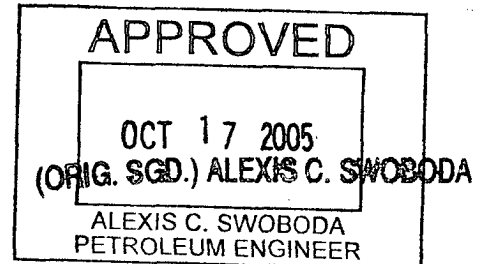
11. County or Parish, State
EDDY COUNTY, NM

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 surface commingling
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	and off lease
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	measurement

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 recompleat 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 recompleat 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.)

SEE ATTACHED REQUEST FORM



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Phyllis Edwards

Title **Regulatory Analyst**

Signature

Phyllis Edwards

Date

09/21/2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

Date

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)

APPLICATION FOR SURFACE COMMINGLING,
OFF LEASE MEASUREMENT APPROVAL

To: Bureau of Land Management
620 E. Greene Street
Carlsbad, NM 88220-6292

COG Operating LLC is requesting approval for surface commingling and off-lease storage and measurement of gas production from the following formation (s) and well (s) on

Federal Lease No: **NM 92180**

Lease Name: **Gold Rush 29 Federal**

<u>Well #</u>	<u>Location</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>	<u>Formation</u>
2	2045' FSL & 705' FWL	29	23S	30E	Nash Draw; Delaware 47545

With gas production from the following formation (s) and well (s) on

Federal Lease No. **NM 93205**

Lease Name: **Gold Rush 30 Federal**

<u>Well No</u>	<u>Location</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>	<u>Formation</u>
5	530' FNL & 1980' FEL	30	23S	30E	Nash Draw Delaware 47545
6	430' FNL & 710' FEL	30	23S	30E	Nash Draw Delaware 47545

Gas production from the wells involved is as follows:

<u>Well Name and No</u>	<u>MCFPD</u>
Gold Rush 30 Fed #5	10
Gold Rush 30 Fed #6	23

COG OPERATING LLC
550 W. Texas, Suite 1300
Midland, TX 79701

RECEIVED

2005 OCT 11 PM 12:27

432-683-7443 P

432-685-4399 F

October 7, 2005

Bureau of Land Management
Attn: Alexis Swoboda
2909 West Second
Roswell, NM 88201-2019

Re: Surface Commingling and Off Lease Measurement
Gold Rush 29 Federal #2
Gold Rush 30 Federal #8
Gold Rush 31 Federal #4

Dear Ms. Swoboda,

Enclosed are three requests for surface commingling and off lease measurement for the above mentioned wells. These requests are to add each of these wells to EXISTING surface commingling and off lease measurement facilities.

Copies of the facility diagrams for each well are attached.

Please contact me at 432-685-4340 or e-mail at pedwards@conchoresources.com if you need anything further from COG.

Thanks so much for your help.

Sincerely,

COG Operating LLC



Phyllis A. Edwards
Regulatory Analyst

Form 3160-5
(April 2004)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007**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 reverse side.**

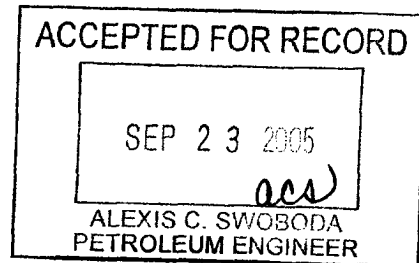
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NM-92180
2. Name of Operator COG Operating LLC		6. If Indian, Allottee or Tribe Name
3a. Address 550 W. Texas Ave., Suite 1300 Midland, TX 79701	3b. Phone No. (in State of Texas) 432-685-4340	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2045' FSL & 705' FWL Unit L, Sec 29, T23S, R30E		8. Well Name and No. GOLD RUSH 29 FEDERAL #2
<div style="text-align: center;"> RECEIVED OCT 19 2005 OCU-ARTESIA </div>		9. API Well No. 30-015-34081
		10. Field and Pool, or Exploratory Area NASH DRAW; DELAWARE
		11. County or Parish, 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 facility diagram
	<input type="checkbox"/> Change Plans	<input 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 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 recomple 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.)

SEE ATTACHED FACILITY DIAGRAM



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Phyllis Edwards

Title Regulatory Analyst

Signature

Phyllis Edwards

Date

09/21/2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

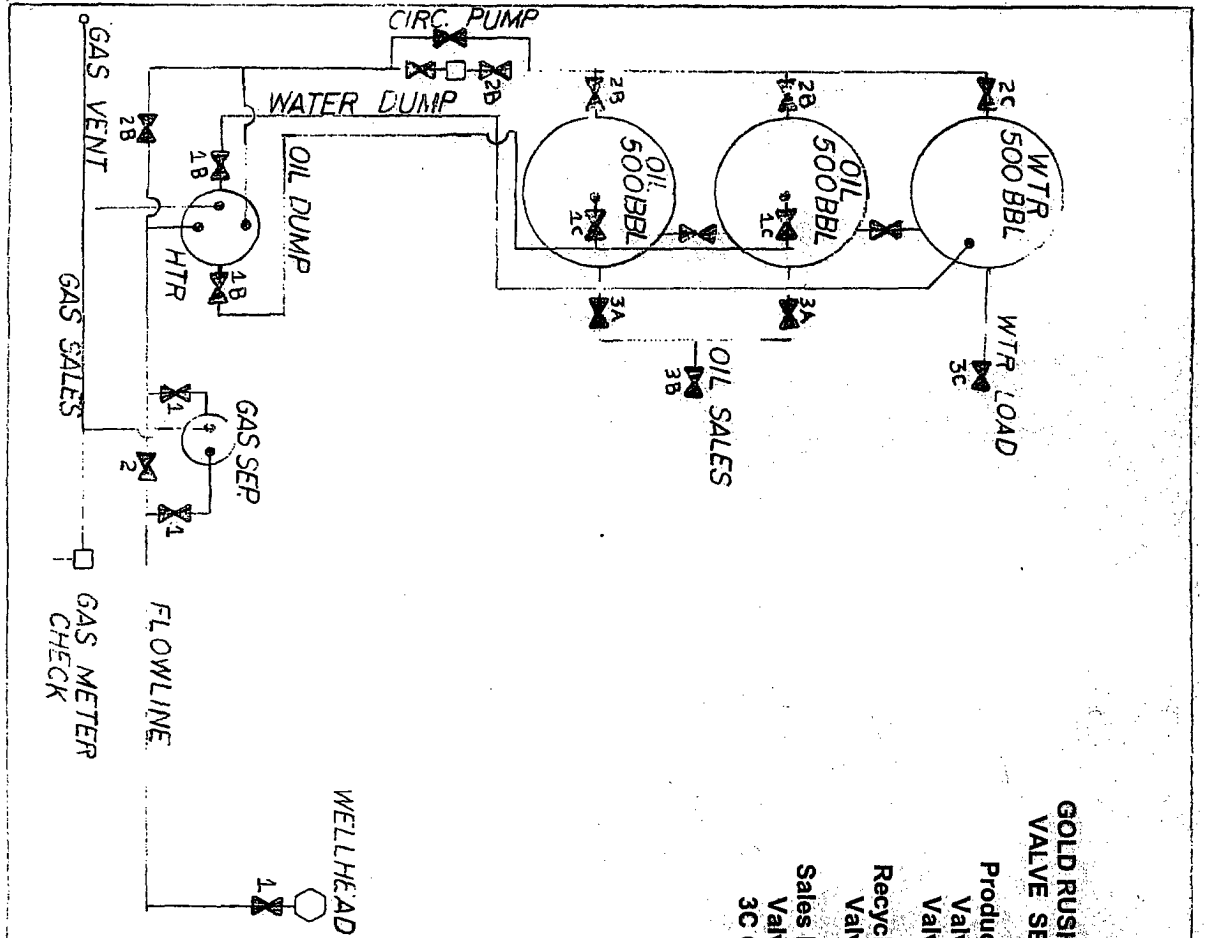
Title

Date

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)



**GOLD RUSH 29 FEDERAL #2
VALVE SEALING DETAIL**

Production Phase:

Valves #1, 1B, 1C Open
Valves #2, 2B Closed

Recycle Phase:

Valves #1, 2B, 1C Open

Sales Phase:

Valves #3A, 3B Open
3C Open for water loading only



COG OPERATING LLC

Fasken Center, Tower II
550 W. Texas Ave., Ste. 1300
Midland, Texas 79701

GOLD RUSH 29 FEDERAL #2
API #3001534081
SEC. 29 23S 30E
2045 FSL 706 FWL
EDDY CO. NEW MEXICO