

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

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.

5. Lease Serial No.
NMLC029415A

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.

8. Well Name and No.
PUCKETT 13 FEDERAL COM 35H

9. API Well No.
30-015-42420

10. Field and Pool, or Exploratory
FREN

11. County or Parish, and State
EDDY COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
COG OPERATING LLC
Contact: CHASITY JACKSON
E-Mail: cjackson@concho.com

3a. Address
ONE CONCHO CENTER 600 W. ILLINOIS AVE
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-686-3087

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 13 T17S R31E Mer NMP SWSE 150FSL 2290FEL

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 Well Spud
	<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 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 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.)

7/14/14 Spud 17-1/2 @ 6AM. TD 17-1/2 @ 680. Ran 15jts 13-3/8 J55 54.5# @ 675. Cmt w/300sx C. lead, 400sx C. tail. PD @ 10:40PM. Circ 258sx. WOC 18hrs. Test BOP to 2000# for 30min,ok.
7/16/14 TD 12-1/4 @ 1899. Ran 45jts 9-5/8 J55 40# @ 1895. Cmt w/350sx C. lead, 325sx C. tail. PD @ 4:40PM. Circ 186sx. WOC 18hrs. Test BOP to 2000# for 30 min, ok. Drill 8-3/4 hole.
7/19/14 TD 8-3/4 vertical section, build curve KOP @ 4884.
7/21/14 TD 8-3/4 curve @ 5795. Drill 7-7/8 lateral 5795 - 9995.
7/25/14 TD 7-7/8 @ 9995MD 5430TVD.
7/26/14 Ran 227jts 5-1/2 17# L80 @ 9995. Cmt w/800sx C. lead, 1500sx C. tail. Circ 202sx. WOC 24hrs. RR.

NM OIL CONSERVATION
ARTESIA DISTRICT
DEC 18 2014

APD 12/18/14
Accepted for record
NMOC

RECEIVED

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

Electronic Submission #255147 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 12/12/2014

Name (Printed/Typed) CHASITY JACKSON Title PREPARER

Signature (Electronic Submission) Date 07/30/2014

ACCEPTED FOR RECORD

DEC 12 2014

12/12/14

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____

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 _____

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.