

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM CONSERVATION  
ARTESIA DISTRICT

JAN 13 2015

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.*

RECEIVED

**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		8. Well Name and No. RUNNING BUFFALO 1 FEDERAL COM 1H
2. Name of Operator COG OPERATING LLC Contact: STORMI DAVIS E-Mail: sdavis@concho.com		9. API Well No. 30-015-41538
3a. Address 2208 WEST MAIN ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946	10. Field and Pool, or Exploratory WC015 G05 S202935P; BS
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T21S R28E Mer NMP NESE 1980FSL 1090FEL		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	
	<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.)

8/13/14 MIRU. Insert test plug & test to 9500#. Set CBP @ 13527' & test to 2000#. Good test.

8/14/14 to 8/21/14 Test csg to 8500#. Good test. Perforate Bone Spring 8812-13520' (576). Acdz w/88054 gal 7 1/2% acid; frac w/6319540# sand & 5628617 gal fluid.

9/3/14 to 9/5/14 Drilled out all frac plugs. Cleaned out to CBP @ 13527'.

9/9/14 Set 2 7/8" 6.5# L-80 tbg @ 7847'. Place well on pump.

9/10/14 Began flowing back & testing.

9/13/14 Date of 1st production.

Accepted for record  
LED NMDCD 1/14/15

14. I hereby certify that the foregoing is true and correct.		Electronic Submission #272918 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 01/02/2015 ()
Name (Printed/Typed) STORMI DAVIS	Title PREPARER	
Signature (Electronic Submission)	Date 10/23/2014	ACCEPTED FOR RECORD JAN 7 2015 Deborah Ham BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By _____	Title _____	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.

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*