

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
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.

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. NMNM112273
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: STORMI DAVIS E-Mail: sdavis@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 575-748-6946	8. Well Name and No. MOSSY FEDERAL 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 12 T20S R29E NENE 0990FNL 550FEL 32.593751 N Lat, 104.029285 W Lon		9. API Well No. 30-015-42735-00-X1
		10. Field and Pool, or Exploratory PARKWAY-BONE SPRING
		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 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.)

12/7/14 Spud well.

12/8/14 TD 26" hole @ 294'. Set 20" 94# J-55 csg @ 292'. Cmt w/300 sx Prem+. Tailed in w/400 sx. DNC. Ran 1" to 101' & pumped 723 sx to surface. Test csg to 1000#. Drilled out 5' below FS w/10# brine - no loss of circ.

12/16/14 TD 17 1/2" hole @ 169'. Set 13 3/8" 54.5# J-55 csg @ 1691'. Cmt w/1200 sx Class C. Tailed in w/350 sx. Circ 385 sx to surface. WOC 18 hrs. Test csg to 1500#. Drilled out 5' below FS w/10# brine - no loss of circ.

12/19/14 TD 12 1/4" hole @ 3210'. Set 9 5/8" 40# J-55 csg @ 3210'. Cmt w/600 sx Class C. Tailed in w/325 sx. Circ 104 sx to surface. WOC 18 hrs. Test csg to 1500#. Drilled out 5' below FS

NM OIL CONSERVATION
ARTESIA DISTRICT

OCT 30 2015

RECEIVED

Accepted for record
JPD NMOCD 11/3/15

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

Electronic Submission #289679 verified by the BLM Well Information System

For COG OPERATING LLC, sent to the Carlsbad

Committed to AFMSS for processing by MARISSA KLEIN on 06/19/2015 (15MGK0146SE)

Name (Printed/Typed) STORMI DAVIS	Title: PREPARER
Signature (Electronic Submission)	Date 01/28/2015

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date OCT 22 2015
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	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD 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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #289679 that would not fit on the form

32. Additional remarks, continued

w/10# brine - no loss of circ. ✓

1/4/15 TD 8 3/4" lateral @ 13673' (KOP @ 7729'). Set 7" 29# P-110 7700-~~0~~ & 5 1/2" 17# P-110 csg 13671-7700'. Cmt w/700 sx Class H. Tailed in w/1750 sx. Circ 267 sx to surface. ✓

1/6/15 Rig released.