

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. NMLC031844
2. Name of Operator COG OPERATING LLC Contact: CHASITY JACKSON E-Mail: cjackson@concho.com		6. If Indian, Allottee or Tribe Name
3a. Address 600 W ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-686-3087	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T17S R31E SWSW 1160FSL 0170FWL 32.859032 N Lat, 103.820728 W Lon		8. Well Name and No. SHINER BOCK 1 FEDERAL COM 27H
		9. API Well No. 30-015-42022-00-X1
		10. Field and Pool, or Exploratory FREN
		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 Drilling Operations
	<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 recomplate 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.)

8/10/15 Test 7 & 5-1/2 csg to 4000# Held.  
8/11/15 Drill out cmt 18' new TD @ 10763.  
8/21/15 Spotted 2000 gals acid. Set plug @ 10677. Test csg to 6221# for 30min.  
9/13/15 Perf 14 stages @ 6311 - 10657 w/6 SPF, 504 holes. Acidize 14 stages w/53,949 gals 15% HCL.  
Frac w/1,678,009 gals gel, 133,941 gals WaterFrac R3,  
102,874 gals WaterFrac R9, 229,005 gals treated water, 3,539,300# 20/40 white sand, 689,918# 20/40 CRC.  
9/25/15 Drill out plugs. Clean out to PBTD 10677.  
9/28/15 RIH w/170jts 2-7/8" J55 6.5# tbg, EOT @ 5748. RIH w/ESP. Hang well on.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
NOV 19 2015

WRD 11/20/15  
Accepted for record  
NMOCD

RECEIVED

14. I hereby certify that the foregoing is true and correct. Electronic Submission #321466 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/29/2015 (16JAS0837SE)	
Name (Printed/Typed) CHASITY JACKSON	Title PREPARED
Signature (Electronic Submission)	Date 10/26/2015
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By _____	Title _____ Date _____
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 _____

ACCEPTED FOR RECORD  
NOV 19 2015  
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.