

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**QCD Artesia**  
FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELL CONSERVATION**  
Do not use this form for proposals to abandon or re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

5. Lease Serial No.  
NMLC028731B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NMNM111789X

8. Well Name and No.  
DODD FEDERAL UNIT 23

9. API Well No.  
30-015-25790-00-S1

10. Field and Pool, or Exploratory  
DODD - GLORIETA-UPPER YESO

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

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well  
 Oil Well    Gas Well    Other

2. Name of Operator  
COG OPERATING LLC  
 Contact: KANICIA CASTILLO  
 E-Mail: kcastillo@concho.com

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

3b. Phone No. (include area code)  
Ph: 432-685-4332

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 14 T17S R29E NWNW 125FNL 25FWL

RECEIVED  
JAN 28 2016

**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 checked="" 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 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 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.)

Re-squeezed perfs 2789-3405 and ran MIT.

10/8/14 MIRU. Function test BOP. TIH w/4-3/4 bit, csg scraper, 132jt workstring. TOOH LD 30jts, stand back 102jts. Secure well.

10/9/14 Function test BOP. TIH w/CBP and 107jts workstring, set CBP @ 3497. TOOH w/tbg and setting tool. TIH w/packer and tbg below top perfs to test CBP. Test to 1000 psi and held. Set packer at 2686'. Attempt to breakdown perfs w/water, release packer and drop to 3400' to spot 500 gals of 15% HCL acid. Pull packer back up to 2689'. Pumped another 500 gals 15% HCL acid. Displace w/fresh water. TOOH w/packer. TIH w/cmt retainer and tbg. Set retainer @ 2719'. Secure well.

10/10/14 MIRU. Pump 300sx cement (150sx 2% & 150sx C Neat). Squeeze off SA Perfs 2789 - 3405.

**SUBJECT TO LIKE APPROVAL BY STATE**

Accepted for record  
LSD NMOCD 1/29/16

Accepted for Record Purposes

Date: \_\_\_\_\_

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

**Electronic Submission #287609 verified by the BLM Well Information System**  
**For COG OPERATING LLC, sent to the Carlsbad**  
**Committed to AFMSS for processing by MARISSA KLEIN on 06/24/2015 (15MGK0161SE)**

Name (Printed/Typed) KANICIA CASTILLO      Title PREPARER

Signature (Electronic Submission)      Date 01/12/2015

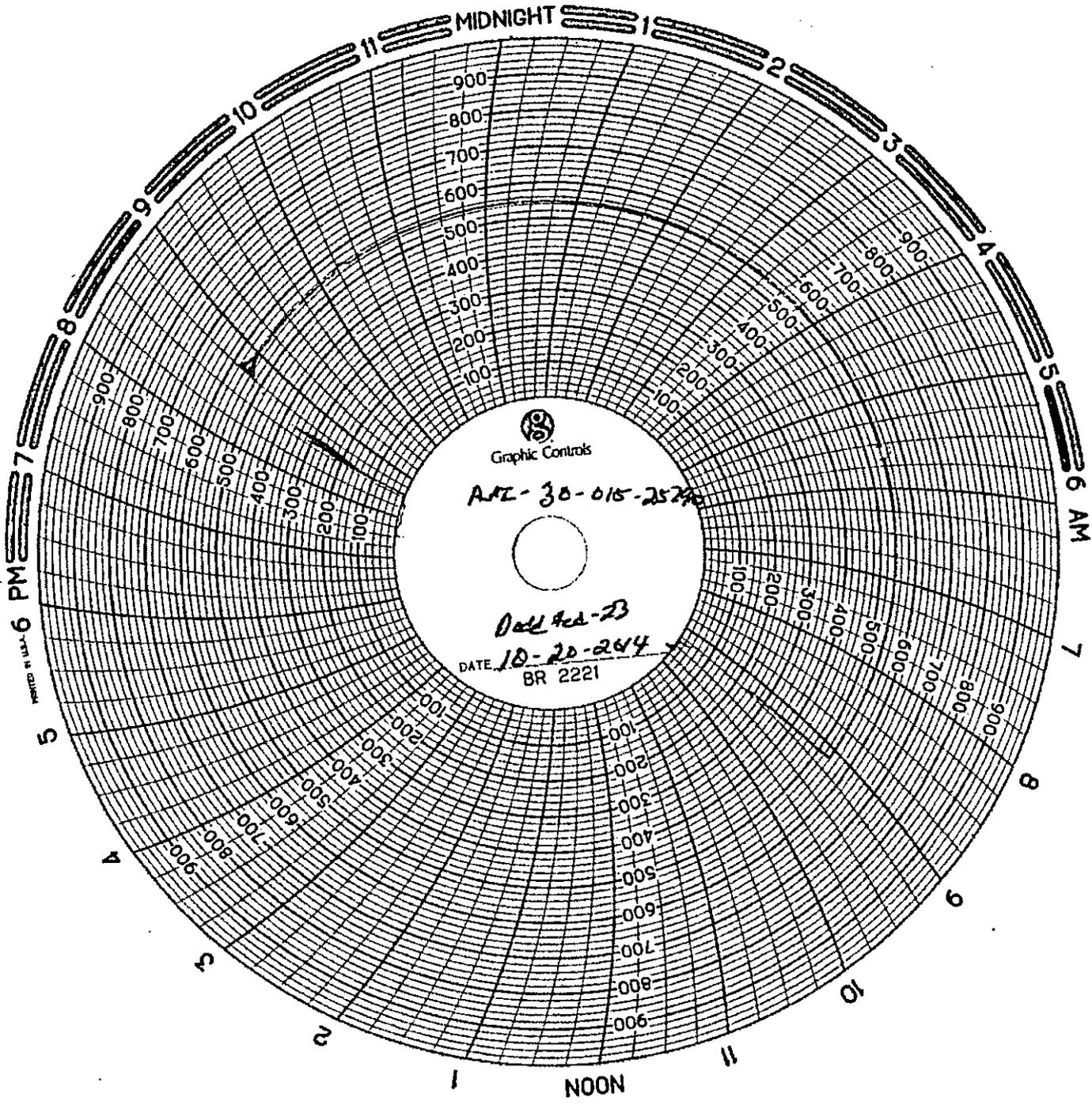
**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By PK Swartz      Title PET      Date 01/22/16

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 GFO

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.



MIDNIGHT

Graphic Controls

AFL-38-015-2574

Dodd Aca-23

DATE 10-20-244

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PRINTED IN U.S.A. 6 PM

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