

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.*

5. Lease Serial No.  
Multiple--See Attached

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.  
Multiple--See Attached

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
Multiple--See Attached

2. Name of Operator  
COG OPERATING LLC  
Contact: ONETHA B AARON  
E-Mail: OAARON@CONCHO.COM

9. API Well No.  
Multiple--See Attached

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

3b. Phone No. (include area code)  
Ph: 432-818-2319  
Fx: 432-221-0858

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Multiple--See Attached

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	Venting and/or Flaring
	<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.)

Actual gas flared for this battery for 11/8/13 to 2/8/14 is as follows:

(Permit approval: Electronic Submission #226179)

NOV Total for Battery = 1050 mcf  
DEC Total for Battery = 0 mcf  
JAN Total for Battery = 0 mcf  
FEB Total for Battery = 420 mcf

Number of wells flared: (6)

SUBMARINE 10 FED COM #2H 30-015-40358

*(Signature)* 11/6/15  
Accepted for record  
NMOCD

14. I hereby certify that the foregoing is true and correct.  
Electronic Submission #253791 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by CATHY QUEEN on 07/15/2015 (15CQ0524SE)

Name (Printed/Typed) ONETHA B AARON

Title ENGINEERING TECH

Signature (Electronic Submission)

Date 07/18/2014

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

Approved By **ACCEPTED**

DAVID R GLASS  
Title PETROLEUM ENGINEER

Date 10/16/2015

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 Carlsbad

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.

**Additional data for EC transaction #253791 that would not fit on the form**

**5. Lease Serial No., continued**

NMLC068722  
NMNM125007

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

NMNM129231  
NMNM129933  
NMNM129991  
NMNM130988

**Wells/Facilities, continued**

<b>Agreement</b>	<b>Lease</b>	<b>Well/Fac Name, Number</b>	<b>API Number</b>	<b>Location</b>
NMNM129933	NMLC068722	SUBMARINE 10 FED COM 2H	30-015-40358-00-S1	Sec 10 T17S R29E NENE 945FNL 15FEL
NMNM129231	NMNM125007	SUBMARINE 11 FED COM 2H	30-015-40359-00-S1	Sec 11 T17S R29E NWNW 945FNL 155FWL
NMNM129991	NMNM125007	SUBMARINE 11 FED COM 3H	30-015-40546-00-S1	Sec 11 T17S R29E SWNW 1605FNL 85FWL
NMNM129991	NMNM125007	SUBMARINE 11 FEDERAL COM 4H	30-015-40360-00-S1	Sec 11 T17S R29E SWNW 2285FNL 130FWL
NMNM130988	NMLC068722	SUBMARINE 10 FED COM 3H	30-015-40543-00-S1	Sec 10 T17S R29E SENE 1605FNL 85FEL
NMNM130988	NMLC068722	SUBMARINE 10 FED COM 4H	30-015-40545-00-S1	Sec 10 T17S R29E SENE 2285FNL 40FEL

**32. Additional remarks, continued**

SUBMARINE 10 FED COM #3H 30-015-40543  
SUBMARINE 10 FED COM #4H 30-015-40545  
SUBMARINE 11 FED COM #2H 30-015-40359  
SUBMARINE 11 FED COM #3H 30-015-40546  
SUBMARINE 11 FED COM #4H 30-015-40360

Reason: DCP COMPRESSOR ISSUES