UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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.

Ca	FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018					
	rishad/Lield	Office				
	6. If a lian A lotte of The N	ane				

	Cold						
SUBMIT IN 1	7. If Unit or CA/Agreement, Name and/or No. NMNM88525X						
Type of Well ☐ Gas Well ☐ Oth	8. Well Name and No. BURCH KEELY UNIT 903						
Name of Operator COG OPERATING LLC	SELL		9. API Well No. 30-015-43287				
3a. Address 600 W. ILLINOIS AVENUE MIDLAND, TX 79701	3b. Phone No Ph: 432-68	No. (include area code) 685-4385		10. Field and Pool or Exploratory Area BURCH KEELY;G-UPPER YESO			
4. Location of Well (Footage, Sec., T		11. County or Parish, State					
Sec 13 T17S R29E SENW 14		EDDY COUNTY, NM					
12. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	ER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
	☐ Acidize	Dee	pen	☐ Product	tion (Start/Resume)	☐ Water Shut-Off	
■ Notice of Intent	☐ Alter Casing	☐ Hyd	raulic Fracturing	□ Reclam	ation	☐ Well Integrity	
☐ Subsequent Report	☐ Casing Repair	□ Nev	v Construction	☐ Recomp	olete	⋈ Other	
☐ Final Abandonment Notice	☐ Change Plans	Plug	g and Abandon	☐ Tempor	arily Abandon Change to Original A		
	Convert to Injection	Plug	g Back	■ Water I	Disposal	10	
testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection. COG Operating LLC respectfully requests a two year extension to this APD scheduled to expire 07/24/2017. NM OIL CONSERVATION ARTESIA DISTRICT AUG 0 1 2017 APPROVED FOR 29 MONTH PERIOD ENDING 7-23-2019 RECEIVED							
14. I hereby certify that the foregoing is	true and correct.						
	Electronic Submission # For COG (#380487 verifie DPERATING L	d by the BLM Wel LC, sent to the Ca	l Informatio Irlsbad	n System		
	Committed to AFMSS for	processing by			==		
Name (Printed/Typed) ROBYN R		Title REGULATORY ANALYST					
Signature (Electronic S	Date 07/03/2017						
	THIS SPACE FO	OR FEDERA	AL OR STATE	OFFICE U	SE		
Approved By Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conduct Title 18 U.S.C. Section 1001 and Title 43	d. Approval of this notice does uitable title to those rights in the let operations thereon. U.S.C. Section 1212, make it a	e subject lease		>	ake to any department or a	Data ///7	
States any false, fictitious or fraudulent s	statements or representations as	s to any matter w	ntnın its jurisdiction.				