

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NMOCD**  
**Artesia**

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.<br>NMLC028784A                         |
| 6. If Indian, Allottee or Tribe Name                       |
| 7. If Unit or CA/Agreement, Name and/or No.<br>NMNM88525X  |
| 8. Well Name and No.<br>BURCH KEELY UNIT 418               |
| 9. API Well No.<br>30-015-36183                            |
| 10. Field and Pool or Exploratory Area<br>GRAYBURG JACKSON |
| 11. County or Parish, State<br>EDDY COUNTY, NM             |

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

|                                                                                                                                  |                                                       |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| 1. Type of Well<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | 2. Name of Operator<br>COG OPERATING LLC              | Contact: SANDY BALLARD<br>E-Mail: sballard@concho.com |
| 3a. Address<br>600 W. ILLINOIS AVE<br>MIDLAND, TX 79701                                                                          | 3b. Phone No. (include area code)<br>Ph: 432-685-4373 |                                                       |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 18 T17S R30E 25FSL 900FEL                          |                                                       |                                                       |

**12. CHECK THE 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"/> Hydraulic Fracturing | <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 recompleate 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 must be filed once 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.

Burch Keely Unit #418  
BURCH KEELY UNIT SATELLITE B  
Permit approval: Electronic Submission # 373591  
Actual gas flared for this battery for 4/24/17 to 7/23/2017 is as follows:  
April  
Total Battery = 0 mcf  
May  
Total for Battery = 0 mcf  
June  
Total Battery = 0 mcf  
July  
Total for Battery = 0 mcf

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

12410 NOV 29 2017  
RECEIVED

*Remove Abandoned well*

|                                                                                                                                                                                                                                                                    |                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 14. I hereby certify that the foregoing is true and correct.<br>Electronic Submission #393770 verified by the BLM Well Information System<br>For COG OPERATING LLC, sent to the Carlsbad<br>Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/01/2017 () |                                |
| Name (Printed/Typed) SANDY BALLARD                                                                                                                                                                                                                                 | Title ADMINISTRATIVE ASSISTANT |
| Signature (Electronic Submission)                                                                                                                                                                                                                                  | Date 11/01/2017                |
| <b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>                                                                                                                                                                                                                  |                                |
| Approved By _____                                                                                                                                                                                                                                                  | Title _____                    |
| 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 2 2017  
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.

(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

**Additional data for EC transaction #393770 that would not fit on the form**

**32. Additional remarks, continued**

NUMBER OF WELLS TO FLARE: (65  
See attachment

Reason for flare: PLANNED MIDSTREAM CURTAILMENT. FRONTIER SHUT DOWN

Burch Keely Sat B

NUMBER OF WELLS TO FLARE: (65)

BURCH-KEELY UNIT #25 30-015-23168-00-S1

BURCH-KEELY UNIT #27 30-015-04189-00-S1

BURCH-KEELY UNIT #28 30-015-04188-00-S1

BURCH-KEELY UNIT #29 30-015-04190-00-S1

BURCH-KEELY UNIT #47 30-015-03082-00-S1

BURCH-KEELY UNIT #48 30-015-24977-00-S1

BURCH-KEELY UNIT #49 30-015-21265-00-S1

BURCH-KEELY UNIT #50 30-015-03078-00-S1

~~BURCH-KEELY UNIT #51 30-015-21268-00-S1~~

BURCH-KEELY UNIT #52 30-015-04201-00-S1

BURCH-KEELY UNIT #53 30-015-22091-00-S1

BURCH-KEELY UNIT #54 30-015-04199-00-S1

BURCH-KEELY UNIT #55 30-015-21657-00-S1

~~BURCH-KEELY UNIT #56 30-015-04202-00-S1~~

~~BURCH-KEELY UNIT #57 30-015-04198-00-S1~~

BURCH-KEELY UNIT #58 30-015-04192-00-S1

BURCH-KEELY UNIT #61 30-015-05911-00-S1

BURCH-KEELY UNIT #62 30-015-03081-00-S1

BURCH-KEELY UNIT #225 30-015-27645-00-S1

BURCH-KEELY UNIT #234 30-015-27652-00-S1

BURCH-KEELY UNIT #238 30-015-28331-00-S1

BURCH-KEELY UNIT #239 30-015-28018-00-S1

BURCH-KEELY UNIT #242 30-015-27646-00-S1

BURCH-KEELY UNIT #244 30-015-28089-00-S1

BURCH-KEELY UNIT #262 30-015-28333-00-S1

BURCH-KEELY UNIT #269 30-015-29510-00-S1

BURCH-KEELY UNIT #270 30-015-29529-00-S1

BURCH-KEELY UNIT #274 30-015-29811-00-S1

BURCH-KEELY UNIT #282 30-015-29722-00-S1

BURCH-KEELY UNIT #297 30-015-30731-00-S1

BURCH-KEELY UNIT #304 30-015-30633-00-S1

BURCH-KEELY UNIT #321 30-015-32098-00-S1

BURCH-KEELY UNIT #322 30-015-32108-00-S1

BURCH-KEELY UNIT #327 30-015-32430-00-S1

BURCH-KEELY UNIT #328 30-015-32425-00-S1

BURCH-KEELY UNIT #334 30-015-32702-00-S1

BURCH-KEELY UNIT #335 30-015-32701-00-S1

BURCH-KEELY UNIT #355 30-015-32789-00-S1

BURCH-KEELY UNIT #357 30-015-32915-00-S1

BURCH-KEELY UNIT #358 30-015-32916-00-S1

BURCH-KEELY UNIT #359 30-015-32969-00-S1

BURCH-KEELY UNIT #360 30-015-32970-00-S1

BURCH-KEELY UNIT #361 30-015-32991-00-S1

BURCH-KEELY UNIT #362 30-015-32971-00-S1

BURCH-KEELY UNIT #379 30-015-33816-00-S1

BURCH-KEELY UNIT #382 30-015-33811-00-S1

BURCH-KEELY UNIT #384 30-015-33813-00-S1

BURCH-KEELY UNIT #387 30-015-33812-00-S1

BURCH-KEELY UNIT #388 30-015-33815-00-S1

BURCH-KEELY UNIT #396 30-015-33810-00-S1

BURCH-KEELY UNIT #401 30-015-35432-00-S1

BURCH-KEELY UNIT #402 30-015-35440-00-S1

BURCH-KEELY UNIT #403 30-015-35441-00-S1

BURCH-KEELY UNIT #404 30-015-35434-00-S1

BURCH-KEELY UNIT #405 30-015-35439-00-S1

BURCH-KEELY UNIT #418 30-015-36183-00-S1

BURCH-KEELY UNIT #583 30-015-39540-00

BURCH-KEELY UNIT #586 30-015-39908-00

BURCH-KEELY UNIT #643 30-015-39570-00

BURCH-KEELY UNIT #644 30-015-39571-00

AB17

AB17  
ABD

BURCH-KEELY UNIT #654 30-015-40280-00- ✓  
BURCH-KEELY UNIT #656 30-015-40005-00- ✓  
BURCH-KEELY UNIT #657 30-015-39567-00- ✓  
BURCH-KEELY UNIT #585 30-015-40274-00- ✓  
BURCH-KEELY UNIT #914 30-015-40300-00- ✓