

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD 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.
NMLC028793A

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 27. If Unit or CA/Agreement, Name and/or No.
NMNM88525X8. Well Name and No.
BURCH KEELY UNIT 966H9. API Well No.
30-015-44067-00-S110. Field and Pool or Exploratory Area
BURCH KEELY-GLORIETA-UPPER YE11. County or Parish, State
EDDY COUNTY, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
COG OPERATING LLCContact: KANICIA CASTILLO
E-Mail: kcastillo@concho.com3a. Address
600 W ILLINOIS AVENUE
MIDLAND, TX 797013b. Phone No. (include area code)
Ph: 432-685-4332

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

Sec 19 T17S R30E Lot 8 1957FSL 290FWL
32.818165 N Lat, 104.018707 W Lon**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 checked="" 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 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 recompleat 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 recompleat 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.

Interim Reclamation Complete.

Downsized:

117' from the North side.
141' from the East side.

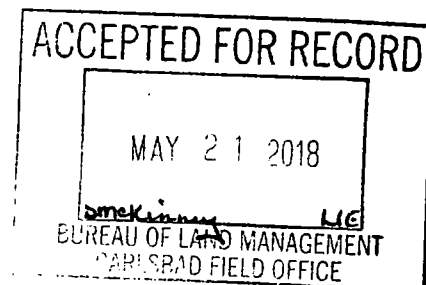
Ready for inspection.

GC 6-4-18
Accepted for record - NMOC

RECEIVED

MAY 31 2018

DISTRICT II-ARTESIA O.C.D.



4-27-18 A.Aria

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

Electronic Submission #405024 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by PRISCILLA PEREZ on 02/22/2018 (18PP1188SE)

Name (Printed/Typed) KANICIA CASTILLO

Title PREPARER

Signature (Electronic Submission)

Date 02/20/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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

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)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Dec 1/8/18

**UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SURFACE INSPECTION FORM

Well Name: BURCH KEELY UNIT			Well #: 966H		API #: 300154406700S1		Well Status: POW	
Footage: 1957FSL 290FWL		Alliquot:	Lot/Tract:	Section: 19	Twtnship/Lat: 17S (32.81817)	Rng/Long: 30E (104.01871)	County: EDDY	State: NM
Case: NMNM88525X		Facility ID:			Associated Rights of Way:			
Lease: NMLC028793		AH2S Date:		H2S Gas Stream:		H2S Vapors:		H2S Radius:
Hazard: No								
SME: BUREAU OF LAND MANAGEMENT			Operator Name: COG OPERATING LLC					

Please be sure to complete for inspection

Inspector: <i>Arthur Arias</i>		Company/SME Rep:				Phone #:	
Date: <i>4/27/18</i>	Type: <i>ES</i>	Activity: <i>IR</i>	Office: <i>1.0</i>	Travel: <i>1.3</i>	Insp: <i>0.8</i>		

General Remarks:

I conducted a Interim Reclamation inspection on this location the work has been completed on the east and north side of the location the work included ripping and contouring the IR also the area has been bermed. The area has been recently completed with the work no currently there is no growth. There is no unused equipment or signs of spills. This will be place into monitor status.
 Author: ARTHUR ARIAS Date: 04/27/2018

IRIP1

Follow-up Requirements: (circle any that apply) NONE VERBAL LETTER INC NOTIFY PET

Follow-up Remarks:

CORRECT PROBLEM BY:

NEXT INSPECTION: