## OCD-ARTESIA

Form 3160 (April 2004)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No 1004-0137 Expures March 31, 2007

)	Lease	senai	INO

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.					LC-055259		
				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		
1. Type of Well Gas Well Other		AUG 0.2 2007		8 Well Name and No			
2 Name of Operator COG Operating LLC OCD-ARTESIA			MOHAWK FEDERAL #3  9. API Well No.				
		3b Phone No (include	de area code)	9. API WEI NO. 30-015-34901			
		432-685-4340	,	10 Field and Pool, or Exploratory Area			
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)		)		JACKSON; ABO  11 County or Parish, State			
990' FSL & 990' FWL SEC. 14, T17S, R30E, UNIT M				EDDY, NM			
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, R				EPORT, OR OTHER DATA			
TYPE OF SUBMISSION		TY	TE OF ACTION				
Notice of Intent	Acidize Deepen Production (Start/Re		art/Resume)	Water Shut-Off Well Integrity Other Set &			
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	Recomplete Temporarily At	handon	cement csgs		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	<b>Julius</b> 11	release rig		
determined that the site is ready 5-10-07 Spud 17-1/2" @ 1 5-11-07 TD 17-1/2" @ 43 5-12-07 Ran 11 jts 48# H- Temp survey 150. 5-16-07 TD 12-1/4" @ 139 Test BOP to 2000# 5-25-07 TD 7-7/8" @ 6205 5-26-07 Ran 143 jts 17# J-	/ for final inspection ) [11:15 PM. 5'40 13-3/8" @ 435'. Cmt w/ 1.1" w/ 150 sx C. & 150 sx C. 23'. Ran 33 jts 32# J55 8-5/8' # for 10 min-OK.	80 sx H & 300 sx C & WOC 18 hrs. Test csg ' @ 1388'. Cmtd w/ 600 stg w/ 525 sx C. Cmt 2	448 sx C. PD @ 6:50 F to 1800# for 30 min-0 sx C & 200 sx C. PD	PM. Cmt did OK. D @ 1:45 PM.	Circ 235 sx. WOC 12 hrs.		
	•			A	ACCEPTED FOR REC	OR	
14. I hereby certify that the fore Name (Printed/Typed)	egoing is true and correct	[	,		10 -		
Phyllis Edwards		Title	Regulatory Analyst		Channel Control of the Control of th	] IFAIT	
Signature Phys	lin deva	Date	C	05/31/2007	BUREAU OF LAND MANAGEM CARLSBAD FIELD OFFICE		
Ú	THIS SPACE FOR	R FEDERAL OR	STATE OFFICE	USE			
Approved by			Title		Date		
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to	l or equitable title to those right o conduct operations thereon	s in the subject lease	Office				
Title 18 U.S.C. Section 1001 and Titl States any false, fictitious or fraudu	e 43 USC Section 1212, make i	t a crime for any person	knowingly and willfully	to make to an	y department or agency of the United		

Accepted for record - NMOCD

(Instructions on page 2)