SEP 2 3 2008

Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR

OCD-ARTESIA

FORM APPROVED OM B No. 1004-0137

Expires March 31, 2007	
Lease Senal No	
NID 43/13/43/03/3	

BUREAU OF LAND MANAGEMENT				121/11/05 11/11/01/51, 2007			
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 Senal No NMNM2933 6 If Indian, Allottee or Tribe Name			
							SUBMIT IN TR
1 Type of Well Oil Well □ □	Gas Well C Other			8 Well Na	me and No		
2 Name of Operator COG Operating LLC				Caddo Federal #4 9 API Well No			
3a Address 550 W. Texas Ave., Suite 1300	3b. Phone No. (inclu	de area code)	30-015-35968				
4 Location of Well (Footage, Sec.,	432-083-4393			d Pool, or Exploratory Area iilis; Glorieta-Yeso 96718			
990' FNL & 1850' FEL Sec.17, T17S, R30E, Unit B					11 County or Parish, State Eddy, NM		
12. CHECK A	PPROPRIATE BOX(ES) TO	INDICATE NATU	RE OF NOTICE, F	REPORT, OF	COTHER DATA		
TYPE OF SUBMISSION		ТУ	TE OF ACTION				
Notice of Intent ✓ Subsequent Report	Acidize Alter Casing Casing Repair Change Plans	Deepen Fracture Treat New Construction Plug and Abandon	Production (St Reclamation Recomplete Temporarily A	Well Integrity ✓ Other Addition Of Yeso			
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal				
following completion of the intesting has been completed. Findetermined that the site is ready 07-31-08 MIRU. POOH 08-01-08 POOH w/tbg. 08-04-08 RIH w/RBP &: 08-05-08 Perf @ 4332'-44 08-07-08 Acidize w/3000 w/103 gal 20# li 08-11-08 Release RBP &	w/pump & rods. set @ 4750'. 681', 1 SPF, 33 holes. gal 15% HCL acid. Frac w/112	results in a multiple com filed only after all requir 2,728 gal 20# Xlinked	pletion or recompletion ements, including reclan	in a new interval nation, have been Brady sand; 15	, a Form 3160-4 shall be filed once in completed, and the operator has		
SEP 24 2008							
			Gerry NMO	Guye, Depu CD-Distri	ty Field Inspector		
14 I hereby certify that the fore Name (Printed/Typed)	going is true and correct						
Carol Ann Lance	<u> </u>	Title I	Regulatory Analyst				
Signature Date 08/18/2008							
AUGEFIEL	THIS SPACE FOR F	EDERAL OR S	TATE OFFICE	USE			
Approved by S DA Conditions of approval, if arty are		loes not warrant or	<u> Fitle</u>	D	ate		
certify that the applicant holds legal which would entitle the applicant to Fitle 18 U.S.C. Section 1001 and Title	conduct operations thereon		Office	to make to any	department or agency of the United		
States any false fictitions of fraudil	Ent Salement of refresentations a	s to any matter within it	normgry and Willially	winake to ally	department or agency of the United		