UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED

	OWR M	O. 10	JU4-	013	٥
	Expires:	July	31,	201	(
Lease Seri	al No.				_

SUNDRY NOTICES AND REPORTS ON WELLS	NMNM98122
o not use this form for proposals to drill or to re-enter an andoned well. Use form 3160-3 (APD) for such proposals.	6. If Indian, Allottee or Tribe Name

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Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.			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.				
Type of Well Gas Well □ Oth	ier				8. Well Name and No. SKELLY UNIT 704	1		
Name of Operator Contact: ROBYN ODOM COG OPERATING LLC E-Mail: rodom@conchoresources.com			com		9. API Well No. 30-015-38054			
3a. Address 550 WEST TEXAS AVE, STE MIDLAND, TX 79701	3b. Phone No. Ph: 432-685	(include area code 5-4385	e)	10. Field and Pool, or Exploratory FREN; GLORIETA-YESO				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, and State				
Sec 21 T17S R31E 1146FSL 919FEL					EDDY COUNTY	, NM		
12. CHECK APPR	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF	NOTICE, RE	PORT, OR OTHER	R DATA		
TYPE OF SUBMISSION	TYPE OF ACTION							
Noting of Intent	n Acidize	П Deep	en	☐ Producti	on (Start/Resume)	□ Wate	er Shut-Off	
Notice of Intent	Alter Casing	Fract	ure Treat	Reclama	tion	Well	Integrity	
☐ Subsequent Report	Casing Repair	□ New	Construction	Recomp	•	☐ Othe		
Final Abandonment Notice	Change Plans	Plug	and Abandon	Tempora	arily Abandon	_		
	Convert to Injection	Plug	Back	☐ Water D	isposal			
following completion of the involved testing has been completed. Final Al determined that the site is ready for f COG Operating respectfully resection II: FROM: V-DOOR SOUTH TO: V-DOOR NORTHEAST This request for change is due	equests permission to character to pipelines too close to	led only after all re ange the Spec	equirements, incluing Stip	iding reclamation	RECE NOV 0	IVE 9 2010	D	
14. Thereby certify that the foregoing is	Electronic Submission #	#96042 verified OPERATING LL	by the BLM We C, sent to the C	II Information Carlsbad	System			
Name (Printed/Typed) ROBYN O	DOM		Title PERSO	ON RESPON	SIBLE			
Signature (Electronic S	Submission)		Date 10/28/2	2010				
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE US	SE .			
Approved By			Title FIE	LD MANAGE	R	Da	at 1/15/8	
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conductions of the conduction of t	uitable title to those rights in th uct operations thereon.	ne subject lease	Office	SBAD FIELD (
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a	a crime for any pe	rson knowingly ar	nd willfully to m	ake to any department o	agency of	the United	

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



