

## OCD-ARTESIA

Form 3160-5  
(August, 2007)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010**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.***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 |                                                   | 5. Lease Serial No.<br>NMNM114349                                         |
| 2. Name of Operator<br>COG Operating LLC                                                                                         |                                                   | 6. If Indian, Allottee, or Tribe Name                                     |
| 3a. Address<br>2208 W. Main Street<br>Artesia, NM 88210                                                                          | 3b. Phone No. (include area code)<br>575-748-6946 | 7. If Unit or CA. Agreement Name and/or No.                               |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>330' FNL & 380' FWL, Unit D (NWNW)<br>Sec 31-T25S-R27E |                                                   | 8. Well Name and No.<br>Jack Federal #1H                                  |
| Lat.<br>Long.                                                                                                                    |                                                   | 9. API Well No.<br>30-015-38643                                           |
|                                                                                                                                  |                                                   | 10. Field and Pool, or Exploratory Area<br>Hay Hollow; Bone Spring, North |
|                                                                                                                                  |                                                   | 11. County or Parish, State<br>Eddy NM                                    |

## 12. CHECK APPROPRIATE BOX(S) 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 type="checkbox"/> Altering Casing      | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity   |
| <input checked="" type="checkbox"/> Subsequent Report | <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       | Change of Operator                        |
| <input type="checkbox"/> Final Abandonment Notice     | <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 or pertinent markers and sands. Attach the Bond under which the work will be performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall 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 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

As required by 43 CFR 3100.0-5(a) and 43 CFR 3162.3, we are notifying you of a change of operator on the above-referenced lease.

COG Operating LLC, as new operator, accepts all applicable terms, conditions, stipulations & restrictions concerning operations conducted on the lease or portion of lease described.

COG Operating LLC meets federal bonding requirements as follows (43 CFR 3104):

Bond Coverage: Individually Bonded

BLM Bond File No.: B001039/NMB000740 / *NA000215*

The effective date of the change: October 1, 2010

Previous Owner: Marbob Energy Corporation

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

|                                                    |
|----------------------------------------------------|
| <b>APPROVED</b>                                    |
| APR 7 2011<br>/s/ JD Whitlock Jr                   |
| BUREAU OF LAND MANAGEMENT<br>CARLSBAD FIELD OFFICE |

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

Name (Printed/ Typed)

Stormi Davis

Title:

Regulatory Analyst

Signature:

Date:

4/4/11

**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.

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 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)

*MZ*

**BUREAU OF LAND MANAGEMENT  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972**

**Conditions of Approval**

**COG Operating LLC.**

1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
2. All above ground structures and equipment on the lease shall be painted Shale Green (5Y 4/2). This is to be done within 90 days, if you have not already done so.
3. Submit for approval of water disposal method.
4. Submit updated facility diagrams as per Onshore Order #3
5. This agency shall be notified of any spill or discharge as required by NTL-3A.
6. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
7. Subject to like approval by NMOCD.