

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.  
NMNM123535

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
BROT HELM FEDERAL COM 704H

2. Name of Operator **COG OPERATING LLC** Contact: **AMANDA AVERY**  
E-Mail: **aaavery@concho.com**

9. API Well No.  
30-025-46071-00-X1

3a. Address **ONE CONCHO CENTER 600 W ILLINOIS AVENUE  
MIDLAND, TX 79701-4287** 3b. Phone No. (include area code)  
Ph: **575-748-6940**

10. Field and Pool or Exploratory Area  
WC025G09S253402N-WOLFCAMP  
WILDCAT

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
  
Sec 35 T24S R34E NWNE 250FNL 2235FEL  
32.180569 N Lat, 103.439461 W Lon

11. County or Parish, State  
  
LEA COUNTY, NM

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                |   |  |   |
|--|---|---|--|---|
| <input checked="" 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"/> Subsequent Report           | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Hydraulic Fracturing | <input 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 checked="" 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 recomplete 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 recompletion 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.

Required information for disposal water:

- 1) Name of formation producing water on lease: Bone Spring
- 2) Amount of water producing in barrels per day: 5000 bwpd
- 3) How water is stored on lease: 2-750 BBL Fiberglass tank
- 4) How water is moved to disposal: Piped/Trucked to nearest SWD System.

5) Disposal Facility #1

a) Facility Operator Name: Owl SWD Operating, LLC  
Water leaves COG well pad and is piped to an Owl SWD via trunk line.

Disposal Facility #2

Accepted - NMOCD

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

**Electronic Submission #515797 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs**

**Committed to AFMSS for processing by PRISCILLA PEREZ on 05/19/2020 (20PP2622SE)**

Name (Printed/Typed) **AMANDA AVERY**

Title **REGULATORY ANALYST**

Signature (Electronic Submission)

Date **05/18/2020**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By DEBORAH MCKINNEY

Title **LEGAL INSTRUMENTS EXAMINER**

Date **05/21/2020**

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 **Hobbs**

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 \*\***

**Additional data for EC transaction #515797 that would not fit on the form**

**32. Additional remarks, continued**

- a) Facility Operator Name: Delaware Energy LLC
- b) Name of facility or well name & number: Moomaw SWD #1 (SWD-1730)
- c) Type of facility or well: WDW
- d) Location by 1/4, 1/4, Sec, T & R: N, Sec 25-T24S-R34E

In the event a temporary change of method or location of disposal is necessary, produced water will be trucked to an authorized disposal well in the geographic vicinity.

## Revisions to Operator-Submitted EC Data for Sundry Notice #515797

|                | <b>Operator Submitted</b>   | <b>BLM Revised (AFMSS)</b>   |
|----------------|---|--|
| Sundry Type:   | DISPOSE<br>NOI  | DISPOSE<br>NOI   |
| Lease:         | NMNM123535  | NMNM123535   |
| Agreement:     |   |  |
| Operator:      | COG OPERATING LLC<br>2208 W MAIN STREET<br>ARTESIA, NM 88210<br>Ph: 575-748-6940                                | COG OPERATING LLC<br>ONE CONCHO CENTER 600 W ILLINOIS AVENUE<br>MIDLAND, TX 79701-4287<br>Ph: 432.685.4342 |
| Admin Contact: | AMANDA AVERY<br>REGULATORY ANALYST<br>E-Mail: aavery@concho.com<br><br>Ph: 575-748-6940                         | AMANDA AVERY<br>REGULATORY ANALYST<br>E-Mail: aavery@concho.com<br><br>Ph: 575-748-6940                    |
| Tech Contact:  | AMANDA AVERY<br>REGULATORY ANALYST<br>E-Mail: aavery@concho.com<br><br>Ph: 575-748-6940                         | AMANDA AVERY<br>REGULATORY ANALYST<br>E-Mail: aavery@concho.com<br><br>Ph: 575-748-6940                    |
| Location:      |   |  |
| State:         | NM  | NM   |
| County:        | LEA   | LEA  |
| Field/Pool:    | WC-025 G-09 S253402N; WC  | WC025G09S253402N-WOLFCAMP<br>WILDCAT   |
| Well/Facility: | BROT HELM FEDERAL COM 704H<br>Sec 35 T24S R34E Mer NMP NWNE 250FNL 2235FEL<br>32.180568 N Lat, 103.439464 W Lon | BROT HELM FEDERAL COM 704H<br>Sec 35 T24S R34E NWNE 250FNL 2235FEL<br>32.180569 N Lat, 103.439461 W Lon    |