

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM 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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5 Lease Serial No NMNM118720
2 Name of Operator COG Operating LLC	6 If Indian, Allottee, or Tribe Name
3a Address 2208 W. Main Street Artesia, NM 88210	7 If Unit or CA Agreement Name and/or No
3b Phone No (include area code) 575-748-6946	8 Well Name and No Patterson B-52 Federal #5H
4 Location of Well (Footage, Sec, T, R, M, or Survey Description) 2310' FSL & 660' FEL, Unit I (NESE) Sec 5-T19S-R32E 367' FSL & 732' FEL, Unit P (SESE) Sec 5-T19S-R32E	9 API Well No 30-025-38970
Lat. Long.	10 Field and Pool, or Exploratory Area Lusk; Bone Spring, North
	11 County or Parish, State Lea 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Production (Start/ Resume)
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Recomplete
	<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 type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other
	Completion Operations

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 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 reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

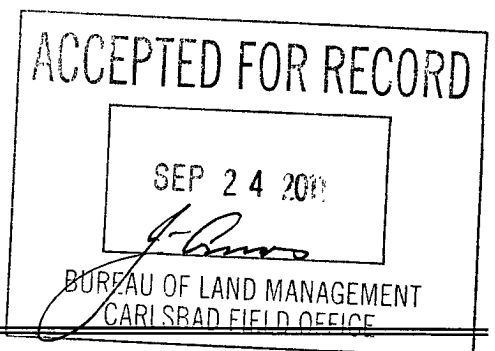
8/13/11 Rig released.

8/19/11 to 8/23/11 MIRU WSU. TIH & tag PBTD @ 11093'. Circulate clean.

8/24/11 to 8/29/11 Perforate Bone Spring 9525-11063' (184). Acdz w/8820 gal 7 1/2% acid. Frac w/1151732# sand & 1046745 gal fluid.

8/30/11 Began flowing back thru frac plugs.

9/14/11 Drilled out all frac plugs. Circulate hole clean.



14 I hereby certify that the foregoing is true and correct

Name (Printed/ Typed)

Stormi Davis

Title

Regulatory Analyst

Signature

Date

9/15/11

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.

Office

Title 18 USC Section 1001 AND Title 43 USC 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)