Form 3160-5 (August 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Hobbs HOBBS OCD FORM APPROVED OMB NO 1004-0135 Expires July 31, 2010

Lease Serial No

## **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 V 1 4 2011

NMLC029405B 6 If Indian, Allottee or Tribe Name

| •                                                                                                                                                                                                                                                                                              |                                                                           |                                                                                                                        |                                                                |                                     |                           |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------|---------------------------|--|
| SUBMIT IN TRIPLICATE - Other instructions on reverse side.                                                                                                                                                                                                                                     |                                                                           |                                                                                                                        |                                                                | 7. If Unit or CA/Agree              | ement, Name and/or No     |  |
| 1 Type of Well                                                                                                                                                                                                                                                                                 |                                                                           |                                                                                                                        |                                                                | 8 Well Name and No                  |                           |  |
| Oil Well Gas Well Other                                                                                                                                                                                                                                                                        |                                                                           |                                                                                                                        |                                                                | GC FEDERAL 56                       |                           |  |
| 2 Name of Operator Contact CHASITY JACKSON COG OPERATING LLC / E-Mail. cjackson@conchoresources com                                                                                                                                                                                            |                                                                           |                                                                                                                        |                                                                | 9 API Well No<br>30-025-39474-00-X1 |                           |  |
| 3a Address 3b Phone No (include area code)                                                                                                                                                                                                                                                     |                                                                           |                                                                                                                        | e)                                                             | 10. Field and Pool, or Exploratory  |                           |  |
| 550 WEST TEXAS AVENUE S<br>MIDLAND, TX 79701-4287                                                                                                                                                                                                                                              | 432-686-3087                                                              |                                                                                                                        | MALJAMAR YESDW,                                                |                                     |                           |  |
| 4 Location of Well (Footage, Sec , T , R , M., or Survey Description)                                                                                                                                                                                                                          |                                                                           |                                                                                                                        |                                                                | 11 County or Parish, and State      |                           |  |
| Sec 19 T17S R32E SWSE 623FSL 1913FEL                                                                                                                                                                                                                                                           |                                                                           |                                                                                                                        |                                                                | LEA COUNTY,                         | NM                        |  |
| 12. CHECK APPR                                                                                                                                                                                                                                                                                 | OPRIATE BOX(ES) TO IND                                                    | ICATE NATURE OF                                                                                                        | NOTICE, RE                                                     | PORT, OR OTHE                       | R DATA                    |  |
| TYPE OF SUBMISSION                                                                                                                                                                                                                                                                             | TYPE OF ACTION                                                            |                                                                                                                        |                                                                | ··· <u>-</u> ···                    |                           |  |
| - Notice of Intent                                                                                                                                                                                                                                                                             | Acidize                                                                   | Deepen                                                                                                                 | □ Producti                                                     | on (Start/Resume)                   | ☐ Water Shut-Off          |  |
| □ Notice of Intent                                                                                                                                                                                                                                                                             | ☐ Alter Casing                                                            | Fracture Treat                                                                                                         | ☐ Reclama                                                      | tion                                | ☐ Well Integrity          |  |
| Subsequent Report                                                                                                                                                                                                                                                                              |                                                                           | ☐ New Construction                                                                                                     | ☐ Recomp                                                       | lete                                | _                         |  |
| ☐ Final Abandonment Notice                                                                                                                                                                                                                                                                     | Change Plans                                                              | ☐ Plug and Abandon                                                                                                     | ☐ Tempora                                                      | rily Abandon                        | Other Drilling Operations |  |
|                                                                                                                                                                                                                                                                                                | _                                                                         | ☐ Plug Back                                                                                                            | ☐ Water D                                                      | isposal                             |                           |  |
| determined that the site is ready for fi<br>10/7/11 Spud, 17-1/2 @ 7PM.<br>10/8/11 TD 17-1/2 @ 701. Rai<br>tail. PD @ 10:30PM. Circ 125s<br>10/10/11 TD 11 @ 2102. Ran<br>10/11/11 Cmt w/700sx C.+ add<br>to 2000# for 30 min, ok.<br>10/17/11 TD 7-7/8 @ 7112MD<br>w/600sx C.+add. PD @ 5:45A | n 16jts 13-3/8 H40 48# @ 701.<br>sx. WOC 18.75hrs. Test BOP to            | Cmt w/400sx C. +add<br>o 2000# for 30min. ok.<br>o 6:50AM. Circ 177sx.<br>o 17# @ 7102. DVT 4<br>sx C.+add lead, 400sx | lead, 200sx C<br>WOC 18hrs.<br>011. 10/18/11<br>C.+add tail. F | C.+add Test BOP                     |                           |  |
| 14. Thereby certify that the foregoing is true and correct  Electronic Submission #120763 verified by the BLM Well Information System  For COG OPERATING LLC, sent to the Hobbs  Committed to AFMSS for processing by KURT SIMMONS on 10/20/2011 (12KMS0119SE)                                 |                                                                           |                                                                                                                        |                                                                |                                     |                           |  |
| Name (Printed/Typed) CHASITY                                                                                                                                                                                                                                                                   | JACKSON                                                                   | Title PREPA                                                                                                            | ARER                                                           |                                     |                           |  |
| Signature (Electronic S                                                                                                                                                                                                                                                                        | (ubmission)                                                               | Date 10/19/2                                                                                                           | 2011                                                           |                                     |                           |  |
|                                                                                                                                                                                                                                                                                                | THIS SPACE FOR FE                                                         |                                                                                                                        |                                                                | BE                                  |                           |  |
| ACCEPT                                                                                                                                                                                                                                                                                         | process process                                                           | JAMES A                                                                                                                |                                                                |                                     |                           |  |
| Approved By                                                                                                                                                                                                                                                                                    | **************************************                                    | TitleSUPERVI                                                                                                           | ISOR EPS                                                       |                                     | Date 10/31/2011           |  |
| Conditions of approval, if any, are attache tertify that the applicant holds legal or easy which would entitle the applicant to condition.                                                                                                                                                     | Office Hobbs                                                              |                                                                                                                        |                                                                |                                     |                           |  |
| Fitle 18 U S C Section 1001 and Title 43 States any false, fictitious or fraudulent s                                                                                                                                                                                                          | USC Section 1212, make it a crime statements or representations as to any | for any person knowingly an<br>matter within its jurisdiction                                                          | nd willfully to ma                                             | ake to any department of            | r agency of the United    |  |