UNITED STATES (August 2007) HOBBS OCD UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT DEC 2 SUNDRY NOTICES AND REPORTS ON WELLS				- HOBBOVED	
			OMB	1 APPROVED NO. 1004-0135 s: July 31, 2010	
			5 Lease Serial No NMNM01088		
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	
RECEIVED RECEIVED	I. Use form 3160-3 (APL)) tor such proposals.			
SUBMIT IN TRI	PLICATE - Other instruc	tions on reverse side.	7. If Unit or CA/Agr	reement, Name and/or No.	
1. Type of Well Oil Well Oth	8. Well Name and No LUSK DEEP UN	8. Well Name and No. LUSK DEEP UNIT A 19			
2. Name of Operator Contact: NETHA AARON COG OPERATING LLC E-Mail: oaaron@conchoresources.com			9. API Well No. 30-025-35244	9. API Well No. 30-025-35244-00-S2	
3a. Address 550 WEST TEXAS AVENUE SUITE 100 MIDLAND, TX 79701-4287		3b Phone No. (include area code Ph: 432-818-2319	10. Field and Pool, of	SWD: Strawn	
		Fx: 432-685-4396	ועאצ		
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)		11. County o		•	
Sec 17 T19S R32E SESW 660FSL 1650FWL			LEA COUNTY	, NM	
12. CHECK APPI	ROPRIATE BOX(ES) TO) INDICATE NATURE OF 1	NOTICE, REPORT, OR OTHI	ER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	Acidize	Deepen	Production (Start/Resume)	☐ Water Shut-Off	
☐ Subsequent Report	Alter Casing	Fracture Treat	Reclamation	□ Well Integrity	
Final Abandonment Notice	☐ Casing Repair☐ Change Plans	□ New Construction□ Plug and Abandon	Recomplete	Other Workover Operations	
Tillal Abalidollillent Notice	Convert to Injection	Plug Back	☐ Temporarily Abandon ☐ Water Disposal		
following completion of the involved testing has been completed. Final Al determined that the site is ready for f During the course of normal cup. The well was immediately tubing and packer and found	d operations. If the operation restandonment Notices shall be file final inspection.) operations the pumper fourly shut-in. A pulling unit was a hole in the on/off tool.	sults in a multiple completion or recelled only after all requirements, included the tubing casing annulus	A. Required subsequent reports shall ompletion in a new interval, a Form 3 ting reclamation, have been complete to be pressured We POOH?d w/	160-4 shall be filed once	
14. Thereby certify that the foregoing is	Electronic Submission #1	116671 verified by the BLM We	II Information System		
Comm	For COG (itted to AFMSS for process	OPERATING (LC, sent to the I ing by DEBORAH MCKINNEY	dobbs on 09/01/2011 (11DLM0727SE)		
Name (Printed/Typed) NETHA A	ARON	Title AUTHO	RIZED REPRESENTATIVE		
Signature (Electronic S	Submission)	Date 09/01/2	011		
	THIS SPACE FO	R FEDERAL OR STATE	OFFICE USE		
Approved By ACCEPT	ED	JAMES A TitleSUPERVI		Date 12/18/2017	
Conditions of approval, if any, are attached certify that the applicant holds legal or eq which would entitle the applicant to conditions.	uitable title to those/rights in the	not warrant or e subject lease			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a	crime for any person knowingly and to any matter within its jurisdiction	d willfully to make to any department	or agency of the United	