HOBBS OCD	OCD-HOBBS			
Form 3160-5 UNITED STAT				FORM APPROVED
(August, 2007) APR 0 9 2012	DEPARTMENT OF THE	INTERIOR _		OMB No 1004-0137
A I	BUREAU OF LAND MAN	NAGEMENT		Expires July 31, 2010
DECEIVED SUNDRY NOTICES AND REPORTS ON WELLS			5 Lease Scrial No NMNM086	
RECEIVED SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an				6 If Indian, Allottee, or Tribe Name
abandoned well. Use Form 3160-3 (APD) for such proposals.				
SUBMIT IN TRIPLICATE - Other Instructions on page 2.				7 If Unit or CA Agreement Name and/or No
1 Type of Well X Oil Well Gas Well Other				8 Well Name and No
2 Name of Operator				Tusk Federal #2H
COG Operating LLC				9 API Well No
3a Address 2208 W. Main Street		3b Phone No (include area code)		30-025-39555
Artesia, NM 88210		575-748-6946		10 Field and Pool, or Exploratory Area
4 Location of Well (Footage, Sec., T, R, A		Lat.	Lea; Bone Spring	
SHL: 330' FNL & 330' FWL, Unit D (NWNW) Sec 25-T19S-R34E Long.			11 County or Parish, State	
BHL: 332 FSL & 427 FWL, Unit M (SWSW) Sec 25-1198-R34E Lea; Bone Spring N				
12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
TYPE OF SUBMISSION	TYPE OF ACTION			
Notice of Intent	Acidize	Deepen	Production (Start/ Resume) Water Shut-off
	Altering Casing	Fracture Treat	Reclamation	Well Integrity
X Subsequent Report	Casing Repair	New Construction	Recomplete	Other
	Change Plans	Plug and abandon		<u> </u>
			Temporarily A	
Final Abandonment Notice Convert to Injection Plug back X Water Disposal				
Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof lift the proposal is to deepen directionally or recomplete 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 lif the operation results in a multiple completion or recompletion 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.)				
Required Information for the Disposal of Produced Water:				
 Name of formation produce Amount of water produce How water is stored on leteral How water is moved to display Disposal Facility: See Att 	PD	ACC	APR 4 2012 /s/ JD Whitlock Jr	
SEE ATTACHED FOR				REAU OF LAND MANAGEMENT
CONDITIONS OF APPROVAL CARLSBAD FIELD OFFICE				
COMPITIONS OF THE TAX				
14 I hereby certify that the foregoing is true	and correct			
Name (Printed Typed)		Title		
Stormi Davis	Regulatory Analyst			
Signature	Date 3/22/12			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE				
11				1.
Approved by Conditions of approval, if any are attache	d/Approval of this notice does not w	Title varrant or		Date
certify that the applicant hotels legal or equitable title to those matts in the subject lease Office vinch would entire the applicant to be operations thereon				
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, fictitiousor fraudulent statements or representations as to any matter within its jurisdiction (Instructions on page 2)				

Tusk Federal #2H 30-025-39555 Sec 25-T19S-R34E, Lea County

5) Disposal Facility: #1

a) Facility Operator Name: P&W Resources

30-025-02538

- b) Name of facility of well name & number: Kaiser State #9 (Order SWD-923)
- c) Type of facility of well: WDW

d) Location by 1/4, 1/4, Section, Township & Range: SENW, Sec 13-T21S-R34E

5) Disposal Facility: #2

a) Facility Operator Name: Cooper SWD

- b) Name of facility of well name & number: Jimmy Cooper SWD Facility
- c) Type of facility of well: WDW
- NO NMOCD permit d) Location by 1/4, 1/4, Section, Township & Range: SWNE, Sec 8-T20S-R37E

5) Disposal Facility: #3

- a) Facility Operator Name: Mesquite SWD Inc.
- b) Name of facility of well name & number: Hobbs SWD #5
- c) Type of facility of well: WDW

d) Location by 1/4, 1/4, Section, Township & Range: SENW, Sec 29-T18S-R38E

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

Disposal of Produced Water From Federal Wells Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

- 1. This agency shall be notified of any change in your method or location of disposal.
- 2. Compliance with all provisions of Onshore Order No. 7.
- This agency shall be notified of any spill or discharge as required by NTL-3A.
- 4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- 5. All above ground structures on the lease shall be painted Shale Green (5Y 4/2), or as per approved APD stipulations. This is to be done within 90 days, if you have not already done so.
- 6. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
- 7. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
- 8. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
- 9. Disposal at any other site will require prior approval.
- 10. Subject to like approval by NMOCD.

6/17/2011