

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD
OCD Hobbs
AUG 22 2012
RECEIVED

FORM APPROVED
OMB No 1004-0137
Expires October 31, 2014

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.		7 If Unit of CA/Agreement, Name and/or No
1 Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. FEDERAL USA L #002 - #011
2. Name of Operator COG OPERATING LLC		9. API Well No. MULTIPLE, SEE BELOW
3a. Address 550 W TEXAS AVENUE, SUITE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) 432-685-4332	10 Field and Pool or Exploratory Area TONTON; YATES-SEVEN RIVER
4 Location of Well (Footage, Sec., T., R., M., or Survey Description) MULTIPLE, SEE BELOW		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 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 checked="" type="checkbox"/> Other CHANGE OF OPERATOR
	<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	

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 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 recompleat 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.)

This is notification of Change of Operator on the above referenced well.

COG Operating LLC, as new operator, accepts all applicable terms, conditions, stipulations and restrictions concerning operations conducted on this lease or portion of lease described.

Bond Coverage: BLM Bond No. NMB000740; NMB000215

Change of Operator Effective: 07-02-2012

Former Operator: Three Rivers Operating Co., LLC

SEE ATTACHED FOR
CONDITIONS OF APPROVAL



Lease includes the following wells:

<input checked="" type="checkbox"/> FEDERAL USA L #002	API # 30-025-30641	Location: F-14-19S-33E, 2310 FNL & 2210 FWL
<input checked="" type="checkbox"/> FEDERAL USA L #006	API # 30-025-33902	Location: L-14-19S-33E, 1650 FSL & 330 FWL
<input checked="" type="checkbox"/> FEDERAL USA L #007	API # 30-025-33903	Location: E-14-19S-33E, 2310 FNL & 990 FWL
<input checked="" type="checkbox"/> FEDERAL USA L #010	API # 30-025-35912	Location: D-14-19S-33E, 990 FNL & 530 FWL
<input checked="" type="checkbox"/> FEDERAL USA L #011	API # 30-025-35913	Location: C-14-19S-33E, 990 FNL & 1650 FWL

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) J. STEVE GUTHRIE		Title VICE PRESIDENT OF TEXAS
Signature		Date 6/29/12

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 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

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

Conditions of Approval

COG Operating LLC

August 18, 2012

1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
2. Submit for approval of water disposal method.
3. Submit updated facility diagrams as per Onshore Order #3
4. This agency shall be notified of any spill or discharge as required by NTL-3A.
5. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
7. Subject to like approval by NMOCD.
8. If well is not on production submit Notice of Intent to return well to production or to P&A within 30 days of approval of change of operator.