

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

MAR 19 2014

Lease Serial No.  
NMNM0555568

**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.*

RECEIVED

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. CURLY FEDERAL 001
2. Name of Operator COG OPERATING LLC		9. API Well No. 30-025-38133
3a. Address 600 W. ILLINOIS AVE. MIDLAND, TX 79701		10. Field and Pool, or Exploratory YOUNG BONE SPRING, NORTH
3b. Phone No. (include area code) Ph: 432-687-3033		11. County or Parish, and State LEA COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T17S R32E Mer NMP SWSE 1650FSL 1650FEL		

12. CHECK 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recompletable 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 shall be filed within 30 days following completion of the involved operations. If 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 Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Accepted as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.

01/27/14: SET 5-1/2" CIBP @ 8,950'; PUMP 25 SXS.CMT. @ 8,950'-8,770'; CIRC. WELL W/ PXA FLUID; PUMP 25 SXS.CMT. @ 6,050' WOC.  
01/28/14: TAG TOP OF CMT. PLUG @ 5,890' (OK'D BY BLM).  
01/29/14: PUMP 25 SXS.CMT. @ 4,787'; WOC X TAG @ 4,580'; PUMP 25 SXS.CMT. @ 2,632'.  
01/30/14: TAG CMT. @ 2,452' (OK'D BY BLM); PERF. SQZ. HOLES @ 1,223'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 1,500#; PUMP 25 SXS.CMT. @ 1,273' (PER BLM); PRES. UP ON CSG. TO 500# X WOC (PER BLM); TAG CMT. @ 1,088' (OK'D BY BLM); PERF. SQZ. HOLES @ 475'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 1,000#; PUMP 45 SXS. CMT. @ 525' (PER BLM); PRES. UP ON CSG. TO 1,000# X WOC (PER BLM).  
01/31/14: TAG CMT. PLUG @ 332' (OK'D BY BLM); PERF. X CIRC. TO SURF., FILLING ALL ANNULI 30 SXS.CMT. @ 63'-3"; DIG OUT X CUT OFF WELLHEAD 3" B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL GROUND LEVEL DRY HOLE MARKER.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #234282 verified by the BLM Well Information System**  
**For COG OPERATING LLC, sent to the Hobbs**  
**Committed to AFMSS for processing by DEBORAH HAM on 03/07/2014 ( )**

Name (Printed/Typed) DAVID A EYLER Title AGENT

Signature (Electronic Submission) Date 02/03/2014

RECLAMATION

DUE 7-30-14

THIS SPACE FOR FEDERAL OR STATE OFFICE USE OR RECORD

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 \_\_\_\_\_ Date MAR 15 2014

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.

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

Accepted for Record Only  
OCD 03/21/2014

MAR 24 2014

DM  
A  
62

**Additional data for EC transaction #234282 that would not fit on the form**

**32. Additional remarks, continued**

WELL PLUGGED AND ABANDONED 01/31/14.