Form 3160- 5	UNITED S	TATES	OCD Hobbs	FORM APPROVED		
(August, 2007)	DEPARTMENT OF	THE INTERIOR		OMB No. 1004- 0137		
	BUREAU OF LAND	MANAGEMENT		Expires: July 31, 2010		
				5. Lease Serial No.		
SUNDRY NOTICES AND REPORTS ON WELLS				NMNM120910		
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		
SUBMIT II	N TRIPLICATE - Other Inst	tructions on page 2.	HORBS OCD	7. If Unit or CA. Agreement Name and/or No.		
1. Type of Well Gas Well Gas Well	Other			8. Well Name and No.		
2. Name of Operator			SEP AB COM	Pintail 3 Federal #1H		
COG Production LLC				9. API Well No.		
3a. Address 2208 W. Main Street		3b. Phone No. (incl	ude RECEIVED	30-025-40684 🖌		
Artesia, NM 88210		575-	748-6940	10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R	., M., or Survey Description)	Lat.		WC025 G05 S263208P; Bone Spring	g	
	Unit O Sec 3-T26S-R32F			11. County or Parish, State	<i>~</i>	
SHL: 260' FSL & 2290' FEL	Long.		Lea County NM			
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION		. 1	YPE OF ACTION			
Notice of Intent	Acidize	Deepen	Production (Sta	art/ Resume) Water Shut-off		
	Altering Casing	Fracture Treat	Reclamation	Well Integrity		
Subsequent Report	Casing Repair	New Construction	Recomplete	X Other		
	Change Plans	Plug and abandon	Temporarily Ab	Dandon Site Facility		
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposal			
13. Describe Proposed or Completed	Operation (clearly state all pertir	ent details including estir	nated starting date of a	any proposed work and approximate duration ther	eof.	

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 proposed 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. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 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.)

Please see attached Site Facility Diagram.

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Accepted for Record Purposes. Approval Subject to Onsite Inspection. Date: <u>Alk/ff</u>

14. 1 hereby certify that the foregoing is true and correct. Name (Printed/ Typed) Amy Avery	Title: Regulatory Technician
Signature: Amy Avery	Date: 7/16/13
THIS SPACE FOR FEDE	RAL OR STATE OFFICE USE
Approved by: Conditions of approval, if any are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject h which would entitle the applicant to conduct operations ther	
Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime States any false, fictitiousor fraudulent statements or representations as to any matter within its	e for any person knowingly and willfully to make any department or agency of the United urisdiction.
(Instructions on page 2)	SEP 2 2 2014



Approval Subject to Onsite Inspection. Accepted for Record Purposes.

