

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.

HOBBSCOCD

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

IAN 02 2015

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM086
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 575.748.6946		8. Well Name and No. TUSK FEDERAL 3H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T19S R34E SESW 0170FSL 1820FWL 32.624394 N Lat, 103.515924 W Lon		9. API Well No. 30-025-41573-00-X1
		10. Field and Pool, or Exploratory LEA
		11. County or Parish, and State LEA COUNTY, NM

RECEIVED

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 checked="" type="checkbox"/> Other Drilling Operations
	<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 shall 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 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.)

7/6/14 Spud well.

7/8/14 TD 17 1/2" hole @ 1894'. Set 13 3/8" 54.5# J-55 csg @ 1894'. Cmt w/860 sx Class C. Tailed in w/220 sx. Circ 183 sx to surface. WOC 18 hrs. Test csg to 1000# for 30 mins. Drilled out 5' below FS w/10# brine - no loss of circ.

7/10/14 TD 12 1/4" hole @ 3750'. Set 9 5/8" 36# J-55 csg @ 3748'. Cmt w/865 sx Class C. Tailed in w/200 sx. Circ 244 sx to surface. WOC 18 hrs. Test csg to 1500# for 30 mins. Drilled out 5' below FS w/10# brine - no loss of circ.

7/23/14 TD 7 7/8" lateral @ 15311' (KOP @ 10330'). Set 5 1/2" 17# P-110 csg @ 15299'. Cmt w/930 sx Class C. Tailed in w/1180 sx. Circ 100 sx to surface.

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

**Electronic Submission #256874 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs
Committed to AFMSS for processing by LINDA JIMENEZ on 10/10/2014 (15LJ0165SE)**

Name (Printed/Typed) STORMI DAVIS	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 08/13/2014

ACCEPTED FOR RECORD

DEC 19 2014

Debra Ham
Date

**BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____
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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

JAN 07 2015

JM

Additional data for EC transaction #256874 that would not fit on the form

32. Additional remarks, continued

7/25/14 Rig released.