

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBSOCD

FEB 13 2015

RECEIVED

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

Lease Serial No. NM1101098  
NMOOD Copy

**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 reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit or CA/Agreement, Name and/or No. 891006783D
2. Name of Operator COG OPERATING LLC / Contact: STORMI DAVIS		8. Well Name and No. LUSK DEEP UNIT A 29H /
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 575.748.6946	9. API Well No. 30-025-41563-00-S1 /
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T19S R32E NWNW 355FNL 660FWL / 32.666638 N Lat, 103.794360 W Lon		10. Field and Pool, or Exploratory LUSK
		11. County or Parish, and State LEA COUNTY, NM

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
	<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 recomplete 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.)

Completion operations for Upper Lateral:

4/9/14 to 4/30/14 MIRU. Drill cmt & clean down to TOL. Circulate clean. Test csg to 8000# for 15 mins. Good test. Perforate 12790-12800' (60). Perform injection test.

5/3/14 to 5/6/14 Perforate Bone Spring 8559-12715' (506). Acdz w/63239 gal 7 1/2% acid. Frac w/3334784# sand & 3132598 gal fluid.

5/20/14 to 5/23/14 Drill out all frac plugs. Circulate clean.

6/23/14 Set 2 7/8" 6.5# L-80 tbg @ 7675'. Place well on pump.

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

**Electronic Submission #254461 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs  
Committed to AFMSS for processing by LINDA JIMENEZ on 01/16/2015 (15LJ0457SE)**

Name (Printed/Typed) STORMI DAVIS	Title REGULATORY ANALYST	ACCEPTED FOR RECORD  FEB 11 2015 <i>L. Jimenez</i>
Signature (Electronic Submission)	Date 07/24/2014	
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>		
Approved By _____	Title _____	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
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 \*\***

FEB 18 2015

**Additional data for EC transaction #254461 that would not fit on the form**

**32. Additional remarks, continued**

6/24/14 Date of first production.

Note: Surveys Attached