

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

HOBBS OCD

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.*

AUG 17 2015

5. Lease Serial No.  
NMNM107392 *01200A*

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

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

RECEIVED

8. Well Name and No.  
NIGHTCAP 6 FEDERAL 2H *COM 317831*

9. API Well No.  
30-025-42134-00-X1

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
COG OPERATING LLC

Contact: MAYTE X REYES  
E-Mail: mreyes1@concho.com

3a. Address  
ONE CONCHO CENTER 600 W ILLINOIS AVENUE  
MIDLAND, TX 79701-4287

3b. Phone No. (include area code)  
Ph: 575-748-6945

10. Field and Pool, or Exploratory  
LUSK

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 31: T19S R32E NESE 1680FSL 660FEL  
32.614102 N Lat, 103.798655 W Lon

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 checked="" 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 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	Change to Original A PD
	<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.)

COG Operating LLC, respectfully requests approval for the following changes to the original approved APD.

Name Change:  
From: Nightcap 6 Federal #2H  
To: Nightcap 6 Federal Com #2H

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

BHL Change:  
From: 330' FSL & 2310' FEL Section 6. T20S. R32E  
To: 330' FSL & 1980' FEL Section 7. T20S. R32E

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

Electronic Submission #312291 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs  
Committed to AFMSS for processing by JENNIFER SANCHEZ on 08/11/2015 (15JAS0095SE)

Name (Printed/Typed) MAYTE X REYES Title REGULATORY ANALYST

Signature (Electronic Submission) Date 08/11/2015

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

AUG 14 2015

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 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD 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 \*\*

E-TEAM KZ

AUG 20 2015

*Handwritten initials*

**Additional data for EC transaction #312291 that would not fit on the form**

**32. Additional remarks, continued**

C102 attached.

Flex Hose: See attached.

Drilling Changes:

Drilling program and directional plan attached.