

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NMOCD**  
**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.*

**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		5. Lease Serial No. NMLC029509A	
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: 432-685-4332		8. Well Name and No. IVAR THE BONELESS FEDERAL 12H	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T17S R32E NWNW 85FNL 1283FWL		9. API Well No. 30-025-42997-00-X1	
		10. Field and Pool, or Exploratory MALJAMAR	
		11. County or Parish, and State LEA COUNTY, NM	

AUG 29 2016  
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 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.)

7/03/16 Spud 17-1/2? @ 2:00am. TD 17-1/2? @ 940?. Ran 21jts 13-3/8? J55 54.5# @940?. Cmt w/400sx C  
lead, 400sx C tail. Circ 161sxs.  
7/04/16 PD @ 1:00m. WOC 12hrs. Test BOP to 250# low 2000# high for 10 min, good test.  
7/05/16 TD 12-1/4? @2208?. Ran 49jts 9-5/8? J55 40# @ 2208?. Cmt w/400sx C lead, 275sxs C tail.  
PD @ 7:45pm. Circ 145sxs. WOC 12hrs. Test BOP to 250# low 2000# high for 10min, good test.  
7/08/16 TD 8-3/4? vertical hole @ 5044?. KOP @ 5044?.  
7/12/16 TD 8-3/4? curve @ 6163?.  
7/22/16 TD 8-3/4? lateral @ 10,461?MD, 5667?TVD.  
7/23/16 Ran, 118jts 7? L80 LTC 29# @ 5044?, 122jts 5-1/2? L80 LTC 17# @ 10,430?. Cmt w/800sx C  
lead, 200sxs C tail. Circ 242sxs. PD @ 10:45pm.  
7/24/16 RR.

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

**Electronic Submission #346947 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs  
Committed to AFMS for processing by JENNIFER SANCHEZ on 08/24/2016 (16JAS0504SE)**

Name (Printed/Typed) KANICIA CASTILLO	Title PREPARER
Signature (Electronic Submission)	Date 08/05/2016

ACCEPTED FOR RECORD  
AUG 24 2016  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

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 _____

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.