

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.*

**HOBBS OCD**  
**FEB 06 2017**  
**RECEIVED**

**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. NMNM077090
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: MELANIE WILSON E-Mail: mwilson@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6952	8. Well Name and No. SOMBRERO FEDERAL COM 4H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 13 T24S R34E Mer NMP SWSW 460FSL 380FWL		9. API Well No. 30-025-43286
		10. Field and Pool, or Exploratory RED HILLS;BONE SPRING,N
		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 recomplate 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 to expand the currently approved well pad from 340' x 340' to 400' x 400' as shown on the attached plat. The expansion requested is 30' on all four sides.

*Good to go RK*  
*Same COA's*

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #357690 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs**

Name (Printed/Typed) MELANIE WILSON	Title REGULATORY ANLAYST
Signature (Electronic Submission)	Date 11/10/2016

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

Approved By <i>Cody R. Luster</i>	Title <i>FW</i> FIELD MANAGER	Date <i>02/02/17</i>
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 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.

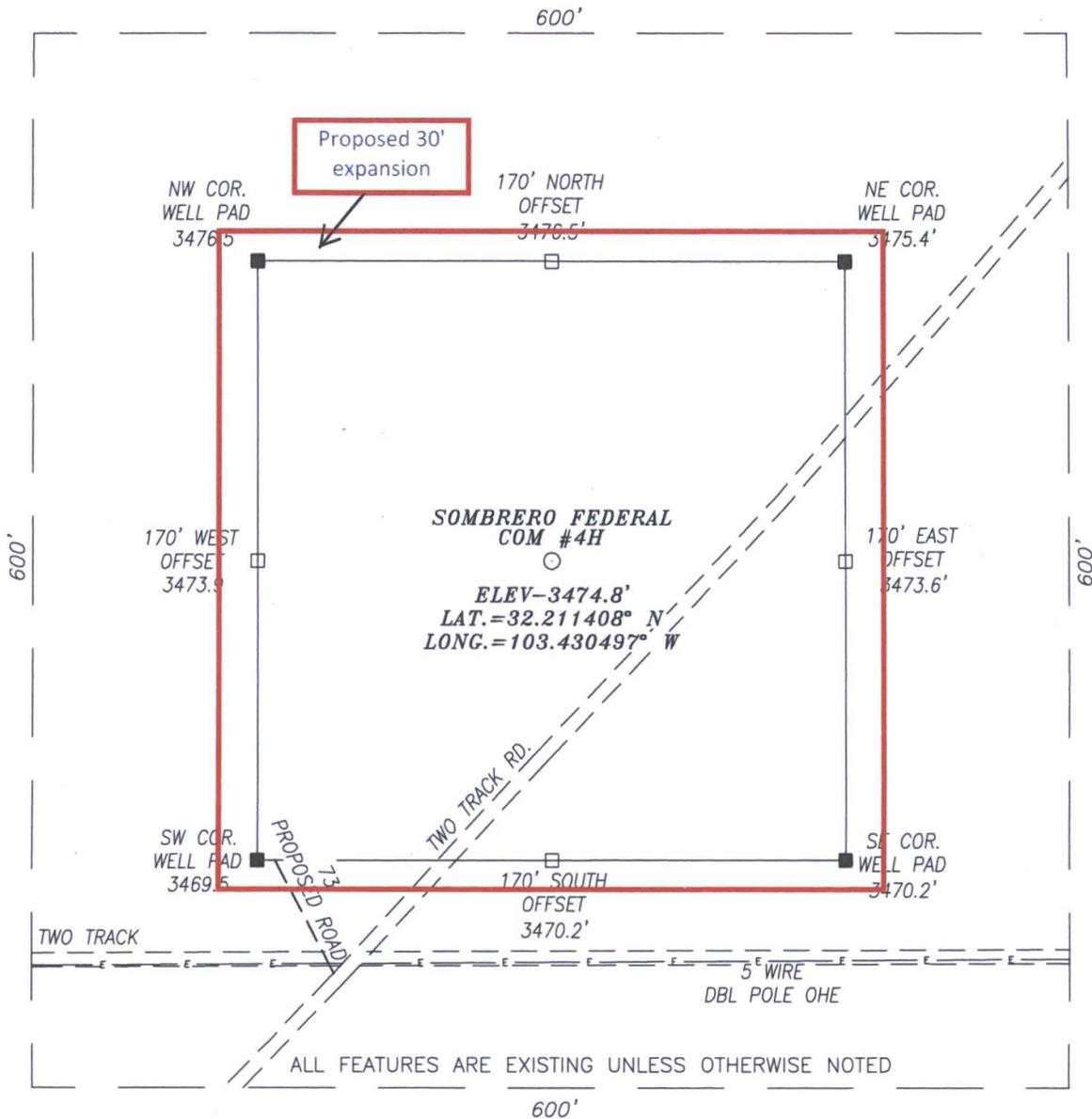
**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

*KSO*

SECTION 13, TOWNSHIP 24 SOUTH, RANGE 34 EAST, N.M.P.M.,

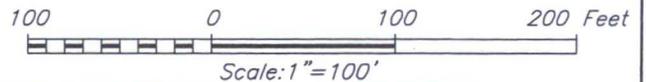
LEA COUNTY

NEW MEXICO



DIRECTIONS TO LOCATION

HEADING EAST ON HWY 128 TURN LEFT (NORTHEAST) APPROX. 0.3 MILES PAST MILEMARKER 36 ONTO A TWO TRACK ROAD; THEN GO APPROX. 0.5 MILES ALONG TWO TRACK; THEN PROPOSED WELL IS APPROX. 270' NORTH.



**HARCROW SURVEYING, LLC**  
 2314 W. MAIN ST, ARTESIA, N.M. 88210  
 PH: (575) 746-2158 FAX: (575) 746-2158  
 c.harcrow@harcrowsurveying.com



<b>COG OPERATING, LLC</b>	
SOMBRERO FEDERAL COM #4H WELL LOCATED 460 FEET FROM THE SOUTH LINE AND 350 FEET FROM THE WEST LINE OF SECTION 13, TOWNSHIP 24 SOUTH, RANGE 34 EAST, N.M.P.M., LEA COUNTY, NEW MEXICO	
SURVEY DATE: 12/30/2014	PAGE: 1 OF 1
DRAFTING DATE: 1/26/2015	
APPROVED BY: CH	DRAWN BY: AF
	FILE: 14-1304