

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

| | | |
|--|---|--|
| ¹ Operator name and Address COG Operating LLC One Concho Center 600 W. Illinois Ave. Midland, TX 79701 | | ² OGRID Number 229137 |
| | | ³ Reason for Filing Code/ Effective Date NW Effective 3/23/17 |
| ⁴ API Number 30 - 025-43157 | ⁵ Pool Name Maljamar; Yeso, West | ⁶ Pool Code 44500 |
| ⁷ Property Code 40481 | ⁸ Property Name Flat Head Federal Com | ⁹ Well Number 15H |

II. ¹⁰ Surface Location

| UI or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South Line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| B | 14 | 17S | 32E | | 940 | North | 2440 | East | Lea |

¹¹ Bottom Hole Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| B | 11 | 17S | 32E | | 370 | North | 2292 | East | Lea |

| ¹² Lse Code | ¹³ Producing Method Code | ¹⁴ Gas Connection Date | ¹⁵ C-129 Permit Number | ¹⁶ C-129 Effective Date | ¹⁷ C-129 Expiration Date |
|------------------------|-------------------------------------|-----------------------------------|-----------------------------------|------------------------------------|-------------------------------------|
| P | P | 3/23/17 | | | |

III. Oil and Gas Transporters

| ¹⁸ Transporter OGRID | ¹⁹ Transporter Name and Address | ²⁰ O/G/W |
|---------------------------------|--|---------------------|
| | Navajo Refining Co | O |
| | DCP Midstream | G |

IV. Well Completion Data

| ²¹ Spud Date | ²² Ready Date | ²³ TD | ²⁴ PBSD | ²⁵ Perforations | ²⁶ DHC, MC |
|-------------------------|------------------------------------|-------------------------|----------------------------|----------------------------|-----------------------|
| 12/15/16 | 3/23/17 | 11,825MD/5901TVD | 11,737 | 6197 - 11717 | |
| ²⁷ Hole Size | ²⁸ Casing & Tubing Size | ²⁹ Depth Set | ³⁰ Sacks Cement | | |
| 17-1/2 | 13-3/8 | 1130 | 750sx | | |
| 12-1/4 | 9-5/8 | 2852 | 850sx | | |
| 8-3/4 | 7 | 5209 | | | |
| 8-3/4 | 5-1/2 | 11,805 | 3150sx | | |
| | 2-7/8 tbg | 6132 | | | |

V. Well Test Data

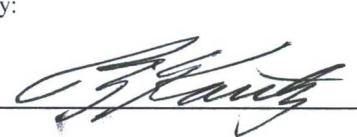
| ³¹ Date New Oil | ³² Gas Delivery Date | ³³ Test Date | ³⁴ Test Length | ³⁵ Tbg. Pressure | ³⁶ Csg. Pressure |
|----------------------------|---------------------------------|-------------------------|---------------------------|-----------------------------|-----------------------------|
| 4/7/17 | 4/6/17 | 4/11/17 | 24hrs | 70 | 70 |
| ³⁷ Choke Size | ³⁸ Oil | ³⁹ Water | ⁴⁰ Gas | ⁴¹ Test Method | |
| | 177 | 4551 | 121 | P | |

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Signature:



Printed name:
Kanicia Castillo
Title:
Lead Regulatory Analyst
E-mail Address:
kcastillo@concho.com
Date:
4/27/17
Phone:
432-685-4332

OIL CONSERVATION DIVISION

Approved by:

Title:
Petroleum Engineer
Approval Date:
04/09/17

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS CO

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

MAY 01 2017

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

| | | | | | | | |
|--|--|-------------------------------------|---|--|--|---|--|
| 1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other | | | | 5. Lease Serial No. NMLC061842 | | | |
| b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. | | | | 6. If Indian, Allottee or Tribe Name | | | |
| Other _____ | | | | 7. Unit or CA Agreement Name and No. | | | |
| 2. Name of Operator COG OPERATING LLC | | | | 8. Lease Name and Well No. FLAT HEAD FEDERAL COM 15H | | | |
| Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com | | | | | | | |
| 3. Address 600 W ILLINOIS AVE ONE CONCHO CENTER MIDLAND, TX 79701 | | | 3a. Phone No. (include area code) Ph: 432-685-4332 | | | 9. API Well No. 30-025-43157 | |
| 4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 14 T17S R32E Mer NMP At surface Lot B 940FNL 2440FEL Sec 14 T17S R32E Mer NMP At top prod interval reported below Lot B 978FNL 2292FEL Sec 11 T17S R32E Mer NMP At total depth Lot B 370FNL 2292FEL | | | | | | 10. Field and Pool, or Exploratory MALJAMAR; YESO, WEST | |
| | | | | | | 11. Sec., T., R., M., or Block and Survey or Area Sec 14 T17S R32E Mer NMP | |
| | | | | | | 12. County or Parish LEA | |
| | | | | | | 13. State NM | |
| 14. Date Spudded 12/15/2016 | | 15. Date T.D. Reached 01/02/2017 | | 16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 03/23/2017 | | 17. Elevations (DF, KB, RT, GL)* 4088 GL | |
| 18. Total Depth: MD 11825 TVD 5901 | | 19. Plug Back T.D.: MD 11737 TVD | | 20. Depth Bridge Plug Set: MD TVD | | | |
| 21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CN | | | | 22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis) | | | |

23. Casing and Liner Record (Report all strings set in well)

| Hole Size | Size/Grade | Wt. (#/ft.) | Top (MD) | Bottom (MD) | Stage Cementer Depth | No. of Sk. & Type of Cement | Slurry Vol. (BBL) | Cement Top* | Amount Pulled |
|-----------|------------|-------------|----------|-------------|----------------------|-----------------------------|-------------------|-------------|---------------|
| 12.250 | 9.625 J55 | 40.0 | | 2852 | | 850 | | | |
| 8.750 | 7.000 L80 | 29.0 | | 5209 | | | | | |
| 8.750 | 5.000 L80 | 17.0 | | 11805 | | 3150 | | | |
| 17.500 | 13.375 J55 | 54.5 | 0 | 1130 | | 750 | | 0 | |

24. Tubing Record

| Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) |
|-------|----------------|-------------------|------|----------------|-------------------|------|----------------|-------------------|
| 2.875 | 6132 | | | | | | | |

25. Producing Intervals

26. Perforation Record

| Formation | Top | Bottom | Perforated Interval | Size | No. Holes | Perf. Status |
|-----------|------|--------|---------------------|-------|-----------|--------------|
| A) YESO | 6197 | 11717 | 6197 TO 11717 | 0.430 | 1116 | OPEN |
| B) | | | | | | |
| C) | | | | | | |
| D) | | | | | | |

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

| Depth Interval | Amount and Type of Material |
|----------------|--|
| 6197 TO 11717 | ACIDIZE W/ 122,976 15% ACID, FRAC W/ 427,434 GALS TREATED WATER, 6,051,360 GALS SLICK WATER, |

28. Production - Interval A

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|---------------------------|
| 04/06/2017 | 04/11/2017 | 24 | → | 177.0 | 121.0 | 4551.0 | 42.0 | 0.60 | ELECTRIC PUMP SUB-SURFACE |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| | SI | 70.0 | → | 177 | 121 | 4551 | 684 | POW | |

28a. Production - Interval B

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| | | | → | | | | | | |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| | SI | | → | | | | | | |

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #374185 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

28b. Production - Interval C

| | | | | | | | | | |
|---------------------|----------------------|--------------|----------------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| Date First Produced | Test Date | Hours Tested | Test Production → | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate → | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |

28c. Production - Interval D

| | | | | | | | | | |
|---------------------|----------------------|--------------|----------------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| Date First Produced | Test Date | Hours Tested | Test Production → | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate → | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

| Formation | Top | Bottom | Descriptions, Contents, etc. | Name | Top |
|------------|------|--------|------------------------------|------------|-------------|
| | | | | | Meas. Depth |
| RUSTLER | 1039 | | ANHYDRITE | RUSTLER | 1039 |
| QUEEN | 3320 | | SANDSTONE | QUEEN | 3320 |
| GRAYBURG | 3780 | | DOLOMITE & ANHYDRITE | GRAYBURG | 3780 |
| SAN ANDRES | 4138 | | DOLOMITE & ANHYDRITE | SAN ANDRES | 4138 |
| PADDOCK | 5645 | | DOLOMITE | PADDOCK | 5645 |

32. Additional remarks (include plugging procedure):
Logs will be submitted in WIS.

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #374185 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs**

Name (please print) KANICIA CASTILLO Title PREPARER

Signature _____ (Electronic Submission) Date 04/27/2017

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.

** ORIGINAL **

SITE FACILITY DIAGRAM

FLAT HEAD FED COM 6H BATTERY
 SHL SECT 14, BHL SECT 11, T17S, R32E
 LEASE NO.: NMNM135168
 Lea County, NM

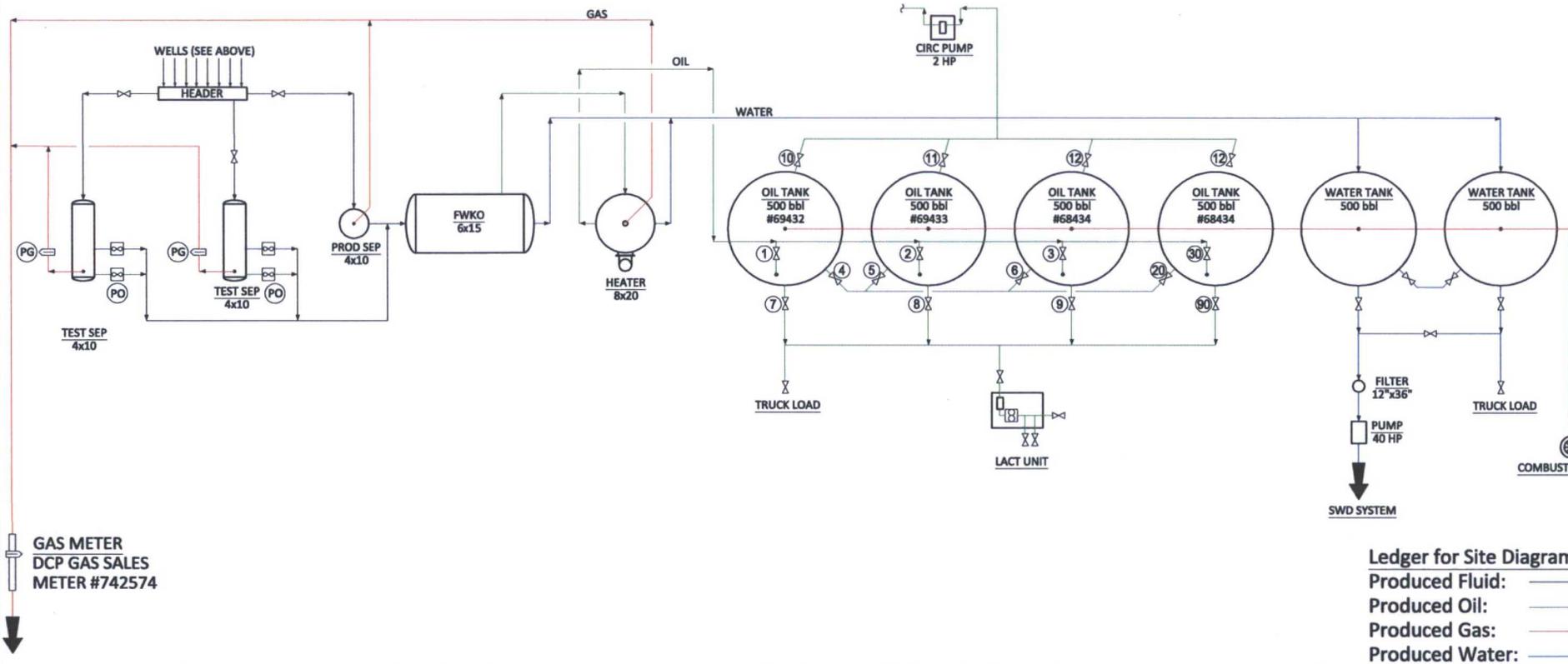


- Production Phase - Oil Tank #1**
- Valve 1 open
 - Valves 2 and 3 closed
 - Valves 4, 5, 6 and 20 open
 - Valves 7, 8, 9 and 90 closed
 - Valves 10, 11, and 12 closed

- Sales Phase - Oil Tank #1**
- Valve 1 closed
 - Valves 2 or 3 open
 - Valve 4 closed
 - Valves 5, 6 and 20 open
 - Valve 7 open
 - Valves 8, 9 and 90 closed
 - Valves 10, 11, and 12 closed

WELLS

- Flat Head Fed Com 6H - 30-025-41759
- Flat Head Fed Com 15H - 30-025-413157
- Flat Head Fed Com 25H - 30-025-43109
- Flat Head Fed Com 26H - PENDING



Ledger for Site Diagram

Produced Fluid: ———

Produced Oil: ———

Produced Gas: ———

Produced Water: ———



Location of Site Security Plan:
COG Operating, LLC.
 600 W. Illinois
 Midland, TX 79701

| DATE: | BY: | REVISION DESCRIPTION |
|--------|-----|------------------------------|
| 4/5/17 | KH | Updated to include 15H & 25H |
| | | |
| | | |
| | | |

SITE FACILITY DIAGRAM
 FLAT HEAD FED COM 6H BATTERY
 EDDY COUNTY, NEW MEXICO

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

HOBB
MAY 01 2017
RECEIVED

5. Lease Serial No.
NMLC061842

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
FLAT HEAD FEDERAL COM 15H

9. API Well No.
30-025-43157

10. Field and Pool or Exploratory Area
MALJAMAR;YESO,WEST

11. County or Parish, State
LEA COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
COG OPERATING LLC
Contact: KANICIA CASTILLO
E-Mail: kcastillo@concho.com

3a. Address
600 W ILLINOIS AVE
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-685-4332

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 14 T17S R32E Mer NMP 940FNL 2440FEL

12. CHECK THE 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"/> Hydraulic Fracturing | <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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Please see attached logs.

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

**Electronic Submission #374182 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs**

Name (Printed/Typed) KANICIA CASTILLO Title PREPARER

Signature (Electronic Submission) Date 04/27/2017

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.

(Instructions on page 2)

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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 OGD
MAY 01 2017
RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on page 2

| | |
|--|---|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Serial No. NMLC061842 |
| 2. Name of Operator COG OPERATING LLC Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com | 6. If Indian, Allottee or Tribe Name 7. If Unit or CA/Agreement, Name and/or No. |
| 3a. Address 600 W ILLINOIS AVE MIDLAND, TX 79701 | 8. Well Name and No. FLAT HEAD FEDERAL COM 15H |
| 3b. Phone No. (include area code) Ph: 432-685-4332 | 9. API Well No. 30-025-43157 |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T17S R32E Mer NMP 940FNL 2440FEL | 10. Field and Pool or Exploratory Area MALJAMAR;YESO,WEST |
| 11. County or Parish, State LEA COUNTY, NM | |

12. CHECK THE 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 checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Acidize <input type="checkbox"/> Alter Casing <input type="checkbox"/> Casing Repair <input type="checkbox"/> Change Plans <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Deepen <input type="checkbox"/> Hydraulic Fracturing <input type="checkbox"/> New Construction <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Plug Back | <input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Reclamation <input type="checkbox"/> Recomplete <input type="checkbox"/> Temporarily Abandon <input type="checkbox"/> Water Disposal | <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Well Integrity <input checked="" type="checkbox"/> Other Drilling Operations |

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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

1/31/17 Drill out DVT.
 2/3/17 Test frac valve to 7200#, good test.
 2/8/17 Test csg to 6202psi for 15min, good.
 2/21/17 - 2/29/17 Perf 31 stages @ 6197 ? 11,717 w/6 SPF, 1116 holes. Acidize 31 stages w/122,976 gals 15% HCL. Frac w/427,434 gals treated water, 6,051,360 gals slick water, 1,851,640# 100 mesh sand, 3,015,800# 40/70 white sand, 634,760# 40/70 CRC.
 3/18/17 ?3/21/17 Drill out plugs. Clean out to PBTD 11,737.
 3/22/17 RIH w/ESP, 184jts 2-7/8" J55 tbg, EOT @ 6132.
 3/23/17 Hang on.

| | |
|---|-----------------|
| 14. I hereby certify that the foregoing is true and correct. | |
| Electronic Submission #374174 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs | |
| Name (Printed/Typed) KANICIA CASTILLO | Title PREPARER |
| Signature (Electronic Submission) | Date 04/27/2017 |

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.

(Instructions on page 2)

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

5. Lease Serial No.
NMLC061842

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
FLAT HEAD FEDERAL COM 15H

2. Name of Operator
COG OPERATING LLC
Contact: KANICIA CASTILLO
E-Mail: kcastillo@concho.com

9. API Well No.
30-025-43157

3a. Address
600 W ILLINOIS AVE
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-685-4332

10. Field and Pool or Exploratory Area
MALJAMAR;YESO,WEST

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 14 T17S R32E Mer NMP 940FNL 2440FEL

11. County or Parish, State
LEA COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing | <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 | Site Facility Diagram/Security Plan |
| | <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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Please see attached facility diagram.

14. I hereby certify that the foregoing is true and correct.
**Electronic Submission #374184 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs**

Name (Printed/Typed) KANICIA CASTILLO Title PREPARER

Signature (Electronic Submission) Date 04/27/2017

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 _____

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(Instructions on page 2)

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