Form 3160₂5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Hobbs

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

Ditpared: emilion j
Lease Serial No.
NIMANIMO5641

5	SUNDR	Y N	OTIC	ES	AND	REPC	PRTS	ON	WELLS	
Do I	not use	this	form	for	propo	sals to	drill	or to	re-enter an	

abandoned well. Use form 3160-3 (APD) for such proposals

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2 AND 1 Type of Well BO CI Well Gas Well Gas Well Other Contact: AMANDA AVERY Contact: AMANDA AVERY 2.00 W MAIN STREET ARTESIA, MR 8210 4. Location of Well (Footage, Sec. T. R. M., or Survey Description) 5. Location of Well (Footage, Sec. T. R. M., or Survey Description) 6. Location of Well (Footage, Sec. T. R. M., or Survey Description) 7. Location of Well (Footage, Sec. T. R. M., or Survey Description) 8. Notice of Intent Gasting Repair Nydraulic Fracturing Reclamation Water Shut-Off 8. Subsequent Report Gasting Repair Nydraulic Fracturing Reclamation Well Integrity 8. Subsequent Report Gasting Repair Nydraulic Fracturing Reclamation Well Integrity 9. Address 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. Attach the Bond under which the work will be performed are provide the Bond No. on file with BLMBIA. Required subsequent proposed work and approximate duration thereof. Attach the Bond under which the work will be performed are provide the Bond No. on file with BLMBIA. Required subsequent proposed work and approximate duration thereof. Attach the Bond under which the work will be performed are provide the Bond No. on file with BLMBIA. Required subsequent proposed work and approximate duration thereof. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLMBIA. Required subsequent proposed work and approximate duration thereof. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLMBIA. Required subsequent reports are be filed only differed to the Bond No. on file with BLMBIA. Required subsequent reports in a three filed within 30 days following completion of the involved operation. If the generation results in a multiple completion or forticing from the provided to the state of thi	abandoned wer	ii. Ose form 5100-5 (Al D) i	or such proposal 40B	Rea					
2. Name of Operator COG OPERATING LLC E-Mail: aswery@concho.com 2. Name of Operator COG OPERATING LLC E-Mail: aswery@concho.com 3.a. Address 2.208 W MAIN STREET ARTESIA, NM 88210 3.b. Phone No. (include area code) Ph. 575-748-6940 10. Field and Pool of Exploratory Area LUSK, BONG SPRING, NORTH ARTESIA, NM 88210 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 Notice of Intent Alter Casing By Address Constitution Constitution Plug Back Water Disposal 13. Describe Proposed or Completed Operation: Clearly state all pertitioned death, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, size substractic locations and measured and tro-vertical defalls of all pertinent markers and zones. If the proposal is to deepen directionally or recomplete must be filed only after all pretinent markers and zones. If the proposal is to deepen directionally or recomplete must be filed only after all pretinent markers and zones. If the proposal is to deepen directionally or recomplete must be filed only after all pretinent markers and zones. If the proposal is to deepen directionally or recomplete must be filed only after all requirements, including relaxation, have been completed and the operator has determined that the site is ready for final inspection. COG Operating LLC respectfully requests to designate Meter # 390222285 as the official facility measurement point (FMP) for gas produced from this well. (Please see attached site facility diagram.) The FMP mater is located on leases must he filed only after all requirements, have been completed and the operator has determined that the site is ready for final inspection. Committed the Application confidence with all the properation of the filed file of Federal Com By House and Completed Department of the folials of the filed file of Federal Com By Hous	SUBMIT IN T		1.) If Unit or CA/Agreen NMNM136846	ment, Name and/or No.					
COG OPERATING LLC E-Mail: asvery@concho.com B. Aldress 2208 W MAIN STREET ARTESIA, NM 88210 4. Location of Well (Footage, Sec. T., R. M., or Survey Description) Sec. 17 T19S R32E NENW 410FNL 1960FWL 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION Alter Casing Brain Brai	1. Type of wen		REOF	81020	o. Well Ivallic and Ivo.				
2208 W MAIN STREET ARTESIA, MM 88210 4. Location of Well (Footage, Sec. T., R. M., or Survey Description) Sec 17 T19S R32E NENW 410FNL 1960FWL 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Alter Casing Hydraulic Fracturing Reclamation Water Shut-Off Alter Casing Repair New Construction Recomplete Casing Repair New Construction Recomplete Convert to Injection Plug Back Water Disposal 13. Describe Proposal is to deepen directionally or recomplete horizonally, give subsurface locations and measured and rue 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 extensing has been completed. Find Abandoment Notice work will be performed or provide the Bond No. on file with BLM BIA. Required subsequent reports must be filed within 30 days extensing has been completed. Find Abandoment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the sate is ready for final inspection. COG Operating LLC respectfully requests to designate Melter # 39022285 as the official facility measurement point (FMP) for gas produced from this well. (Please see attached site facility diagrams.) The FMP melter is located on incess MNMMM36100 at the King Air 8 Federal Com #3H battery. Melter meets API and AGA standards and will measure and be calibrated in compliance with ## APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED Title AUTHORIZED REPRESENTATIVE Date Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant tools legal or equitable enteron. Office	Name of Operator COG OPERATING LLC			IVED		/			
Sec 17 T19S R32E NENW 410FNL 1960FWL	2208 W MAIN STREET								
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Acidize	4. Location of Well (Footage, Sec., T.	., R., M., or Survey Description)			11. County or Parish, S	tate			
TYPE OF SUBMISSION Activate Deepen Production (Start/Resume) Water Shut-Off	Sec 17 T19S R32E NENW 41	0FNL 1960FWL			LEA COUNTY, N	MM			
Notice of Intent	12. CHECK THE AF	PPROPRIATE BOX(ES) TO	INDICATE NATURE OF	F NOTICE,	REPORT, OR OTH	ER DATA			
Subsequent Report	TYPE OF SUBMISSION								
Subsequent Report	Notice of Intent	☐ Acidize	□ Deepen	☐ Product	ion (Start/Resume)	■ Water Shut-Off			
Signature Casing Repair Casing Repair Casing Repair Casing Repair Plug and Abandon Temporarily Abandon Plug Back Water Disposal		☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclam	ation	■ Well Integrity			
Convert to Injection Plug Back Water Disposal	Subsequent Report	□ Casing Repair	☐ New Construction	☐ Recomp	olete	Other			
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 proprists must be filed off you 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. COG Operating LLC respectfully requests to designate Meter # 39022285 as the official facility measurement point (FMP) for gas produced from this well. (Please see attached site facility diagram.) The FMP meter is located on lease NMNM036100 at the King Air 8 Federal Com #3H battery. Meter meets API and AGA standards and will measure and be calibrated in compliance with all federal APPROVED Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE Title Date Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds gall or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	☐ Final Abandonment Notice	☐ Change Plans	□ Plug and Abandon	☐ Tempor	rarily Abandon				
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 with the work which the work which the work which 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. COG Operating LLC respectfully requests to designate Meter # 39022285 as the official facility measurement point (FMP) for gas produced from this well. (Please see attached site facility diagram.) The FMP meter is located on lease NMNM036100 at the King Air 8 Federal Com #3H battery. Meter meets API and AGA standards and will measure and be calibrated in compliance with all federal and requirements and regulations. Committed to AFMSS for processing by DEBORAH MCKINNEY on 03/01/2018 () Name (Printed/Typed) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE Signature (Electronic Submission) Title AUTHORIZED REPRESENTATIVE Date Office Office Office Office Office		☐ Convert to Injection	☐ Plug Back	☐ Water I	Disposal				
14. I hereby certify that the foregoing is true and correct. Electronic Submission #402351 verified by the BLM Well Information System For COG OPERATING I.C., sent to the Hobbs Committed to AFMSS for processing by Name (Printed/Typed) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE Signature (Electronic Submission) Date 01/26/2018 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 Office	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. COG Operating LLC respectfully requests to designate Meter # 39022285 as the official facility measurement point (FMP) for gas produced from this well. (Please see attached site facility diagram.) The FMP meter is located on lease NMNM036100 at the King Air 8 Federal Com #3H battery. Meter meets API and AGA standards and will measure and be calibrated in compliance with all federal APPROVED APR - 9 2018 BUREAU OF LAND MANAGEMENT								
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Signature (Electronic Submission) THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved By Title Date Date O1/26/2018 Title Date Office		For COG OP Committed to AFMSS for pro-	ERATING LLC, sent to the H cessing by DEBORAH MCKI	obbs NNEY on 03	/01/2018 ()				
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.	Name (Printed/Typed) AMANDA	AVERY	Title AUTHO	Title AUTHORIZED REPRESENTATIVE					
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	certify that the applicant holds legal or equ which would entitle the applicant to condu	uitable title to those rights in the sub act operations thereon.	Office		V=				

