

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.  
NMNM123530  
6. If Indian, Allottee or Tribe Name  
7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

**Carlsbad Field Office**  
**OCD Hobbs**  
**HOBBS OCD**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator COG OPERATING LLC	Contact: AMANDA AVERY E-Mail: aavery@concho.com	8. Well Name and No. JACINTO FEDERAL COM 40H
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 575-748-6940	9. API Well No. 30-025-44152-00-X1	10. Field and Pool or Exploratory Area WILDCAT;WOLFCAMP
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T24S R34E SWSE 360FSL 1980FEL 32.182083 N Lat, 103.421593 W Lon			11. County or Parish, State LEA COUNTY, NM

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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 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 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.

6/24/18 Spud well. TD 17 1/2" hole @ 1232'. Set 13 3/8" 68# L-80 csg @ 1232'. Cmt w/ 750 sx Class C. Tail w/ 350 sx. Circ 154 sx to surface. WOC 8 hrs. Test csg to 1500# for 30 min. ✓

7/12/18 TD 12 1/4" hole @ 12165'. Set 9 5/8" 47# P-110 csg @ 12165'. Set DVT @ 5450'. Cmt 1st stage w/ 975 sx Class C. Tail w/ 450 sx. Circ 203 sx to surface. Cmt 2nd stage w/ 1050 sx Class C. Tail w/ 300 sx. Circ 93 sx to surface. ✓

8/17/18 TD 8 1/2" lateral @ 23,038'. Set 5 1/2" 23# P-110 @ 23024'. Cmt w/ 2650 sx Class H. Tail w/ 2550 sx. Circ 860 sx to surface. ✓

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

**Electronic Submission #439454 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs  
Committed to AFMS for processing by PRISCILLA PEREZ on 10/15/2018 (19PP0129SE)**

Name (Printed/Typed) AMANDA AVERY	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 10/12/2018

**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 _____	/s/ Jonathon Shepard

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)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

*KZ*

**Additional data for EC transaction #439454 that would not fit on the form**

**32. Additional remarks, continued**

8/23/18 Released rig.