UNITED STATES DEPARTMENT OF THE INTERIOR

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SUNDRY	5. Lease Serial No. S NMNM121958	5. Lease Serial No. NMNM121958							
abandoned well. Use form 3160-3 (APD) for such proposals						6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instruction struction struc					L NIMANIAM 20COA	7. If Unit or CA/Agreement, Name and/or No. NMNM138694			
Type of Well Gas Well ☐ Oth	MAY .	ED	8. Well Name and No. DOMINATOR 25	8. Well Name and No. DOMINATOR 25 FEDERAL COM 609H					
2. Name of Operator Contact: AMANDA A' COG OPERATING LLC E-Mail: aavery@concho.com			ERKECEL)	9. API Well No. 30-025-44743-0	9. API Well No. 30-025-44743-00-X1			
3a. Address ONE CONCHO CENTER 600 MIDLAND, TX 79701-4287	(include area code) 8-6940	10. Field and Pool or WILDCAT;WOL	and Pool or Exploratory Area OCAT;WOLFCAMP						
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State					
Sec 25 T25S R33E SWSW 28 32.095020 N Lat, 103.531906		LEA COUNTY, NM							
12. CHECK THE AP	PROPRIATE BOX(ES) TO	INDICA'	TE NATURE O	F NO	TICE, REPORT, OR OTH	IER DA	TA		
TYPE OF SUBMISSION	TYPE OF ACTION								
Notice of Intent	☐ Acidize ☐ Deepen ☐		□ P	Production (Start/Resume)		■ Water Shut-Off			
	☐ Alter Casing	☐ Hyd	raulic Fracturing	□ Reclamation		■ Well Integrity			
☐ Subsequent Report	□ Casing Repair	□ New	Construction	□ R	□ Recomplete		Other		
☐ Final Abandonment Notice	☐ Change Plans ☐ Plug and Abandon			O T	☐ Temporarily Abandon				
	☐ Convert to Injection	g Back 🛮 🖸 Water 1		Vater Disposal	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. Required information for disposal water: 1) Name of formation producing water on lease: Bone Spring 2) Amount of water producing in barrels per day: 500 bwpd 3) How water is stored on lease: 2-500 BBL Fiberglass tank 4) How water is moved to disposal: Piped to nearest SWD System. 5) Disposal Facility #1 a) Facility Operator Name: Owl SWD, LLC b) Name of facility or well name & number: Maralo Sholes B #2 (SWD-1127) c) Type of facility or well name & number: Maralo Sholes B #2 (SWD-1127) d) Location by 1/4,1/4, Sec, T & R: NESW, Sec 36-T25S-R36E Disposal Facility #2 a) Facility Operator Name: BC&D Operating Inc.									
Electronic Submission #462395 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs									
Committed to AFMSS for processing by PAMEULA HERNANDEZ on 04/24/2019 (19PGH0008SE)									
Name (Printed/Typed) AMANDA AVERY			Title AUTHORIZED REPRESENTATIVE						
Signature (Electronic S	Date 04/23/2019								
THIS SPACE FOR FEDERAL OR STATE OFFICE USE									
_Approved By			Title	AC(CEPTED FOR REC	CORD	ate		
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		APR 2 4 2019				

Additional data for EC transaction #462395 that would not fit on the form

32. Additional remarks, continued

b) Name of facility or well name & number: West Jal B #1 (SWD 1601)
c) Type of facility or well: WDW
d) Location by 1/4,1/4, Sec, T & R: Unit J Sec 17-T25S-R36E
Disposal Facility #3

e) Facility #3
e) Facility Operator Name: BC&D Operating Inc
f) Name of facility or well name & number: West Jal B Deep Well #1 (SWD 1482)
g) Type of facility or well: WDW
h) Location by 1/4,1/4, Sec, T & R: Unit H Sec 17-T25S-R36E

In the event a temporary change of method or location of disposal is necessary, produced water will be trucked to an authorized disposal well in the geographic vicinity.