

main Form 3160-5 (June 2015)

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.

OCD Hobbs

5. Lease Serial No. NMNM45706 6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

HOBBS OCD

MAY 24 2019

RECEIVED

1. Type of Well [X] Oil Well [] Gas Well [] Other 2. Name of Operator COG OPERATING LLC Contact: AMANDA AVERY E-Mail: aavery@concho.com 3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 3b. Phone No. (include area code) Ph: 575-748-6940 7. If Unit or CA/Agreement, Name and/or No. NMNM135623 8. Well Name and No. CORONADO 35 FEDERAL 1H API Well No. 30-025-42575-00-S1 10. Field and Pool or Exploratory Area WC-025 G08 S2535340 11. County or Parish, State LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

Table with 2 columns: TYPE OF SUBMISSION and TYPE OF ACTION. Includes checkboxes for Notice of Intent, Subsequent Report, Final Abandonment Notice, Acidize, Deepen, Production, Water Shut-Off, etc.

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 or provide the Bond No. on file with BLM/BIA.

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: COG Operating LLC
b) Name of facility or well name & number: Momentum 36 State #1 SWD (SWD-1519)
c) Type of facility or well: WDW
d) Location by 1/4, 1/4, Sec, T & R: NWNW, Sec 36-T25S-R35E

14. I hereby certify that the foregoing is true and correct. Electronic Submission #459451 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/28/2019 (19PP1458SE)

Name (Printed/Typed) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE Signature (Electronic Submission) Date 03/27/2019 ACCEPTED FOR RECORD APR 4 2019 THIS SPACE FOR FEDERAL OR STATE OFFICE USE BUREAU OF LAND MANAGEMENT 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.

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