

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No 1004-0137
Expires March 31, 2007

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.

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well ☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **COG Operating LLC**

3a. Address
550 W. Texas Ave., Suite 1300 Midland, TX 79701

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1650 FNL & 1650 FEL, SEC. 22, T17S, R32E, Unit G

5. Lease Serial No.
NMLC-029509B

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
J C FEDERAL #9

9. API Well No.
30-025-38261

10. Field and Pool, or Exploratory Area
Maljamar; Paddock 44500

11. County or Parish, State
LEA, NM

Yeso
297608

12. CHECK 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"/> Fracture Treat	<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	Completion
	<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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

10/08/07 Perf w/ 2 SPF @ 6335 - 6535, 48 holes.

10/09/07 Acidize w/ 5,000 gals acid. Frac perfs w/ 49,601 gals gel, 45,586# 16/30 sand.

Perf w/ 2 SPF @ 6055 - 6255, 36 holes. Acidize w/5,342 gals acid.

Frac perfs w/ 50,048 gals gel, 61,612# 16/30 sand.

10/11/07 RIH w/ 201 joints 2-7/8" J55 tbg, SN @ 6550'. RIH w/ 2-1/2" x 2" x 24' RHTC pump. Hang on well.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Kanicia Carrillo

Title **Regulatory Analyst**

Signature

Date

10/24/2007

ACCEPTED FOR THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

/S/ DAVID R. GLASS

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 42 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)

COO-HOBBS

Form 3160-4
(April 2004)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO 1004-0137
Expires March 31, 2007

1a Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other

b Type of Completion ☒ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff Resvr,
Other _____

2 Name of Operator **COG Operating LLC**

3 Address **550 W. Texas, Suite 1300, Midland, TX 79701** 3a Phone No (include area code) **432-685-4332**

4 Location of Well (Report location clearly and in accordance with Federal requirements)*
At surface **1650 FNL & 1650 FEL, Unit G**
At top prod interval reported below
At total depth

14 Date Spudded **08/31/2007** 15 Date T D Reached **09/14/2007** 16 Date Completed **10/11/2007**
☐ D & A ☒ Ready to Prod

5 Lease Serial No **NMLC-029509B** 6 If Indian, Allottee or Tribe Name
7 Unit or CA Agreement Name and No
8 Lease Name and Well No **J C Federal #923** 9 AFI Well No **30-025-38261**

10 Field and Pool, or Exploratory **Maljamar; Paddock** 11 Sec, T, R, M, on Block and Survey or Area **Sec 22, T17S, R32E**

12 County or Parish **Lea** 13 State **NM** 17 Elevations (DF, RKB, RT, GL)* **4007' GL**

18 Total Depth MD **7020** 19 Plug Back T D MD **6991** 20 Depth Bridge Plug Set MD **None**
TVD TVD TVD

21 Type Electric & Other Mechanical Logs Run (Submit copy of each)
CN / HNGS, Micro CFL / HNGS

22 Was well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit report)
Directional Survey? ☒ No ☐ Yes (Submit copy)

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 Sks & Type of Cement	Slurry Vol (BBL)	Cement Top*	Amount Pulled
17-1/2	13-3/8	48		679		600 C		Surface	Circ 110
12-1/4	8-5/8	32		2166		800 C		Surface	Circ 213
7-7/8	5-1/2	17		7012		1500 C		Surface	Circ 84

24 Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-7/8	6550	None						

25 Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No Holes	Perf Status
A) Paddock			6055 - 6255	2 SPF	36	Open
B) Paddock			6335 - 6535	2 SPF	48	Open
C)						
D)						

27 Acid, Fracture, Treatment, Cement Squeeze, etc

Depth Interval	Amount and Type of Material
6055 - 6255	Acidize w/ 5,342 gals acid.
	Frac perms w/ 50,048 gals gel, 61,612# 16/30 sand.
6335 - 6535	Acidize w/ 5,000 gals acid.
	Frac perms w/ 49,601 gals gel, 45,586# 16/30 sand.

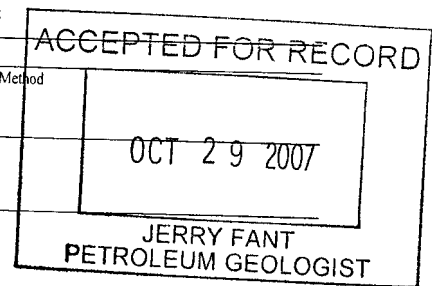
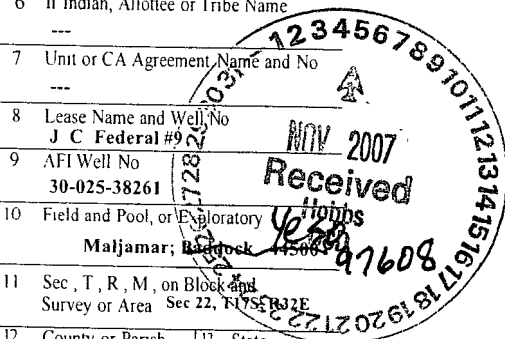
28 Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
10/12/2007	10/14/2007	24	→	143	144	395	37.7		Pumping
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→					Producing	

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	
			→						

(See instructions and spaces for additional data on page 2)



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
Yates	2168				
7 Rivers	2521				
Queen	3125				
Grayburg	3504				
San Andres	3921				
Glorieta	5386				
Yeso	5475				

32. Additional remarks (include plugging procedure)

33. Indicate which items have been attached by placing a check in the appropriate boxes

- ☐ Electrical/Mechanical Logs (1 full set req'd) ☐ Geologic Report ☐ DST Report ☐ Directional Survey
☐ Sundry Notice for plugging and cement verification ☐ Core Analysis ☒ Other:

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

Name (please print) **Kanicia Carrillo**Title **Regulatory Analyst**

Signature

Date **10/24/2007**

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