

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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FEB 11 2008

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.

5 Lease Serial No.

NMLC-029509A

6 If Indian, Allottee or Tribe Name

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

8. Well Name and No.

MC FEDERAL #13

9. API Well No

30-025-38551

10. Field and Pool, or Exploratory Area

MALJAMAR; PADDOCK 44500

11 County or Parish, State

LEA, NM

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)

1811 FNL & 990 FEL
SEC. 21, T17S, R32E, UNIT H

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 Completion
	<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 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.)

12/11/07 Perf @ 6570 - 6770 w/ 2 SPF, 48 total holes.

12/12/07 Acidize w/ 5,504 gals acid. Frac w/ 128,982 gals gel, 169,656# 16/30 sand. Set Comp plug at 6520'.

Perf @ 6300 - 6500 w/ 2 SPF, 36 holes.

Acidize w/ 5,588 gals acid. Frac perfs w/ 81,260 gal acid, 63,595# 16/30 sand. Set Comp plug at 6250'.

Perf @ 6030 - 6230 w/ 2 SPF, 36 holes.

Acidize w/ 5,000 gals acid.

Frac w/ 177,954 gals gel, 282,165# 16/30 sand.

12/21/07 Drill out Comp plugs @ 6250' and 6520', drill out push down hole to 7000'. RIH w/ 208 joints 2-7/8" J55 tbg, SN @ 6784'.

RIH w/ 2-1/2" x 2" x 20' RHTC pump. Turn to production.

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

Kancia Carrillo

Title Regulatory Analyst

Signature

Date

02/08/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Chris Williams

OC DISTRICT SUPERVISOR/GENERAL MANAGER

Date

MAR 26 2008

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 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)

UNITED STATES
DEPARTMENT OF THE INTERIOR
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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

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

1a Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5 Lease Serial No NMLC-029509A							
b Type of Completion. <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff Resvr, Other _____		6 If Indian, Allottee or Tribe Name							
2 Name of Operator COG Operating LLC		7 Unit or CA Agreement Name and No							
3 Address 550 W. Texas, Ste. 1300 Midland, Texas 79701		8 Lease Name and Well No. MC Federal #13							
3a Phone No. (include area code) 432-685-4332		9 AFI Well No 30-025-38551							
4 Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 1811 FNL & 990 FEL, Unit H Sec 21, 17S, 32E At top prod interval reported below At total depth		10 Field and Pool, or Exploratory Maljamar; Paddock 44500							
14 Date Spudded 11/17/2007		11 Sec., T, R, M, on Block and Survey or Area Sec. 21., T17S, R32E							
15 Date T.D. Reached 12/01/2007		12 County or Parish Lea							
16 Date Completed 12/21/2007 <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod		13 State NM							
17 Elevations (DF, RKB, RT, GL)* 4027 GL									
18. Total Depth MD 7125 TVD	19 Plug Back T D MD 7103 TVD	20 Depth Bridge Plug Set: MD TVD							
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CN / HNGS, Micro CFL / HNGS		22 Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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#		663		850		Surface	Circ 227
12 1/4	8 5/8	32#		2126		900		Surface	Circ 80
7 7/8	5 1/2	17#		7117		1250		Surface	Circ 273
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	6784								
25. Producing Intervals									
Formation		Top	Bottom	Perforated Interval		Size	No Holes	Perf Status	
A) Paddock				6030 - 6230		0.41	36	Open	
B) Paddock				6300 - 6500		0.41	36	Open	
C) Paddock				6570 - 6770		0.41	48	Open	
D)									
27 Acid, Fracture, Treatment, Cement Squeeze, etc.									
Depth Interval		Amount and Type of Material							
6030 - 6230		Acidize w/ 5,000 gals acid. Frac w/177,954 gals gel, 282,165# 16/30 sand.							
6300 - 6500		Acidize w/ 5,588 gals acid. Frac w/81,260 gals gel, 63,595# 16/30 sand.							
6570 - 6770		Acidize w/ 5,504 gals acid. Frac w/128,982 gals gel, 169,656# 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
01/03/2008	01/31/2008	24	→	99	163	210	38.3		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)

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HOBBS OCD

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 7 Rivers Queen Grayburg San Andres Glorieta Yeso Tubb		2134 2489 3084 3455 3836 5342 5414 6879			

32. Additional remarks (include plugging procedure)

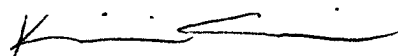
33. Indicate which items have been attached by placing a check in the appropriate boxes.

- ☐ 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 **02/08/2008**

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