

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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
NMLC057210

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: UNKNOWN OTH

8. Well Name and No.
FEDERAL BI 1

2. Name of Operator
COG OPERATING LLC

Contact: PHYLLIS A. EDWARDS
E-Mail: pedwards@conchoresources.com

9. API Well No.
30-025-27068

3a. Address
550 W. TEXAS SUITE 1300
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-685-4340
Fx: 432-685-4399

10. Field and Pool, or Exploratory
MALJAMAR; YESO WEST

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 28 T17S R32E SESW 480FSL 1980FWL

11. County or Parish, and State

LEA COUNTY, NM

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 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	
	<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.)

COG Operating LLC respectfully requests a change of operator for this well from CononcoPhillips Company to COG Operating LLC. This well was plugged and COG plans to re-enter and convert to a SWD well. The OCD will make the operator change on their website after COG completes the work. The API number will remain the same.

RECEIVED

AUG 21 2008

HOBBS OCD

OK APD Approved to Re-enter
7/23/08. Should take
care of the Oper Chg.
J. Amos 8-16-08

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

Electronic Submission #62179 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs

Name (Printed/Typed) PHYLLIS A. EDWARDS

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/12/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

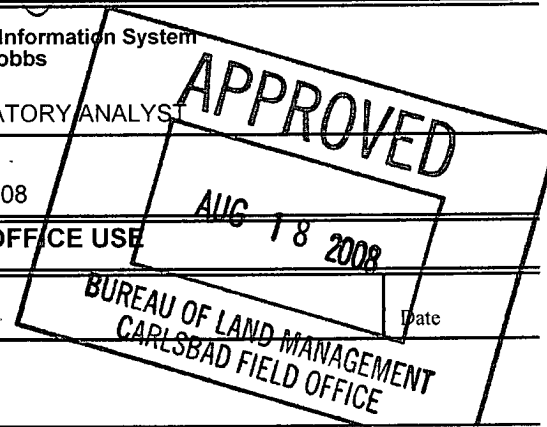
Approved By

Chris Williams

Title

Office

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.



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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****