т - т				f	ATS-08-8
, OCD-	HORBS				
Form 3160 -3 (April 2004)	12	15		FORM APPROVED OMB No 1004-0137 Expires March 31, 2007	
UNITED ST Department of T Bureau of Land	HE INTERIOR	/		5 Lease Serial No. LC-029509B	
APPLICATION FOR PERMIT TO DRILL OR REENTER				6. If Indian, Allotee or Tribe Name N/A	
la Type of work.	☑ DRILL □ REENTER			7 If Unit or CA Agreement, Name and No N/A	
lb Type of Well. 🖌 Oil Well Gas Well Other	Si	ngle Zone 🔲 Multi	ple Zone	8 Lease Name and Well No SOA	
2 Name of Operator COG Operating LLC		229137	>	9 API Well No. 30-025- 3917D	
3a Address 550 W. Texas, Suite 1300 Midland TX 797		3b Phone No. (include area code) / (432) 685-4340		10. Field and Pool, or Exploratory Maljamar; Yeso, West 44500	
Location of Well (Report location clearly and in accordance with any State requirements*) At surface 330' FSL & 1800' FWL, UL N At proposed prod zone				 Sec., T. R. M. or Blk and Survey or Area Sec 22, T17S, R32E 	
 14 Distance in miles and direction from nearest town or post office* 2.5 miles south of Maljamar, NM 			12 County or Parish Lea	13 State NM	
 15 Distance from proposed* location to nearest property or lease line, ft (Also to nearest drig unit line, if any) 330' 	16 No. of a	16 No. of acres in lease 17. Spaci 520 40		ng Unit dedicated to this wel	l
18 Distance from proposed location* to nearest well, drilling, completed, applied for, on this lease, ft 477'	-			/BIA Bond No on file B000215	
 Elevations (Show whether DF, KDB, RT, GL, etc.) 4002' GL 	22. Approxi	mate date work will sta 06/01/2008	rt*	23. Estimated duration 10 days	
	24. Atta				
 The following, completed in accordance with the requirements of Well plat certified by a registered surveyor. A Drilling Plan. A Surface Use Plan (if the location is on National Forest SUPO shall be filed with the appropriate Forest Service Official 	System Lands, the	 Bond to cover t Item 20 above) Operator certific 	he operati cation specific in	his form: ons unless covered by an ex: formation and/or plans as ma	-
25 Signature Audlich - Showard		Name (Printed/Typed) Phyllis A. Edwa			ate 07/21/2008
Title Regulatory Analyst					
proved by (Signature) /s/ Don Peterson		Name (Printed/Typed).		A	11G 1 9 2008
FIELD MANAGER	Office	Office CARL		SBAD FIELD OFFICE	
Application approval does not warrant or certify that the applica conduct operations thereon Conditions of approval, if any, are attached	nt holds legal or equi		ts in the su		tle the applicant to
Title 18 USC Section 1001 and Title 43 USC Section 1212, make states any false, fictitious or fraudulent statements or representation	e it a crime for any p ions as to any matter v	erson knowingly and			gency of the United
*(Instructions on page 2)	RECE			K	. C
I Controlled Water Basin	SFP -	2 2008			

SEE ATTACHED FOR CONDITIONS OF APPROVAL HOBBS OCCApproval Subject to General Requirements & Special Stipulations Attached