New Mexico Oil Conservation Division, District I 1625 N. French Drive UNITED STATE Hobbs, NM 88240

Form 3160-5

FORM APPROVED

(April 2004)	I	DEPARTMENT OF THE INTERIOR				OM B No 1004-0137 Expires. March 31, 2007	
		BUREAU OF LAND MAN			5 Lease Seria	l No ANM-105887	
SUNDRY NOTICES AND REPORTS ON WELLS					6 If Indian, Allottee or Tribe Name		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.							
					N/A		
SUBMIT IN TRIPLICATE- Other instructions on reverse side.						7. If Unit or CA/Agreement, Name and/or No N/A 8. Well Name and No.	
1. Type of Well ☐ ☐ Gas Well ☐ ☐ Other							
2 Name of O	perator coco				→	lromeda Federal #3	
	COG Opera	nting LLC			9. API We	ll No /	
3a Address 3b Phone No. (include area code)					30-005-27977 10 Field and Pool, or Exploratory Area		
550 W. Texas Ave., Suite 1300 Midland, TX 79701 432-685-4385							
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					Wildcat; Wolfcamp		
SHL: 1650' FSL & 330' FWL Sec.14, T15S, R31E, Unit L					11 County o	r Parish, State	
	BHL: 1050.	FSL & 330' FEL / Sec.1	4, T15S, R31E, Unit 1		Chaves,	NM /	
	12. CHECK AF	PPROPRIATE BOX(ES) TO	INDICATE NATUR	E OF NOLICE, R	EPORT, OR	OTHER DATA	
TYPE OF	TYPE OF SUBMISSION TYPE OF ACTION						
		Acidize	Deepen	Production (Sta	art/Resume)	Water Shut-Off	
☐ Notice o	f Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity	
Subsequ	ent Report	Casing Repair	New Construction	Recomplete		Other Request APD	
Final Ab	vandanment Nation	Change Plans	Plug and Abandon	Temporarily Ab	oandon	Extension	
Final Abandonment Notice		Convert to Injection	Convert to Injection Plug Back Water Disposal				
Attach the following testing had determine	posal is to deepen direct e Bond under which the g completion of the invention is been completed. Fin ed that the site is ready	ctionally or recomplete horizontally e work will be performed or provice folved operations. If the operation real al Abandonment Notices shall be f	give subsurface location the the Bond No. on file we esults in a multiple complified only after all requiren	s and measured and tru ith BLM/BIA Require etion or recompletion in nents, including reclam	ne vertical depths ed subsequent re n a new interval, ation, have been	a Form 3160-4 shall be filed once	
	-				02		
RECEIVED							
			SEP 28	3 2009			

HOBBSOCD

APD Expires	5 10-16-11						
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)							
Robyn M. Odom	Title Regulatory Analyst						
Signature 2000 Am	Date 09/16/2009						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by	Assistant Field Manager SEP 2 1 2009						
Conditions of approval, if any, are attached Approval of this notice does not warran certify that the applicant holds legal or equitable title to those rights in the subject lea which would entitle the applicant to conduct operations thereon	or						

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