

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

Form 3160-3
(April 2004)

RECEIVED

DEC 08 2009

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS

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.

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

5. Lease Serial No
SHL-NM-105887, BHL-VO7943

6. If Indian, Allottee or Tribe Name
N/A

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

8. Well Name and No.
Andromeda 14 Federal Com #1

9. API Well No.
30-005-27975

10. Field and Pool, or Exploratory Area
Wildcat, Wolfcamp

11. County or Parish, State
Chaves, 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)
432-685-4385

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

SHL: 660' FNL & 330' FEL Sec.14, T15S, R31E, Unit A
BHL: 660' FNL & 330' FWL Sec.14, T15S, R31E, Unit D

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION				
<input checked="" 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 Change Drilling Plan	
	<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 permission to change the casing program to:

Type	Hole Size	Casing Type	Casing Weight/ft.	Setting Depth	Sacks of Cement	Est TOC
Surf	17.5	13.375	48	400	450	0
Int 1	12.25	9.625	40	4000	1000	0
Int 2	8.75	7	26	8000	600	0
Prod	6.125	4.5	11.6	13450	0	* Not Cemented

COG proposes to drill 17-1/2" hole to 500' w/ fresh water mud system, wt. 8.5, vis 28, set 13-3/8" casing & cement to surf. Drill an 12.25" hole to 4000' w/ brine mud system, wt 10, vis 30, set 9-5/8" casing & cement to surf. Drill 8-3/4" hole to 8000' w/ cut brine mud system, wt 8.7, vis 29-32. Set 7" prod casing @ +/- 8000'. Drill 6-1/8" pilot hole thru Top Lower Abo to +/- 9100', run open hole logs. Spot +/- 250sxs C. Kick off plug from +/- 9100' to +/- 8000'. Drill 6-1/8" hole & kick off @ +/- 8300', building curve over +/- 450' horizontal section in a Westerly direction for +/- 4650' lateral to TD @ +/- 13450' MD, 8745' TVD. Run 4-1/2" prod liner in un-cemented open hole lateral & set isolation packers & liner top packer @ +/- 7800' MD.

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

Robyn M. Odom

Title **Regulatory Analyst**

Signature

Date

11/25/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by **/S/ DAVID R. GLASS**

Title **PETROLEUM ENGINEER**

Date **DEC 02 2009**

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 **ROSSELL FIELD 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)

PETROLEUM ENGINEER

DEC 09 2009