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HOBBSSOCD

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: UNKNOWNOTH SWD		5. Lease Serial No. NMLC057210
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
3a. Address 550 WEST TEXAS AVENUE SUITE 100 MIDLAND, TX 79701-4287		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-686-3087		8. Well Name and No. FEDERAL BI 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 28 T17S R32E NENW 480FWL 1980FWL S		9. API Well No. 30-025-27068-00-S1
		10. Field and Pool, or Exploratory UNKNOWN- SWD Wolfcamp
		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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Fracture Treat
	<input checked="" type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Other

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 recompletable 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 recompletable 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 request to repair casing. We will locate hole using the packer and plug method. Once we find the leak we will repair with cement squeeze.

SEE ATTACHED FOR
CONDITIONS OF APPROVALSUBJECT TO LIKE
APPROVAL BY STATE

14. Thereby certify that the foregoing is true and correct. Electronic Submission #99371 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by CHERYLE RYAN on 12/28/2010 (11CMR0042SE)	
Name (Printed/Typed) CHASITY JACKSON	Title PREPARER
Signature (Electronic Submission)	Date 12/21/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By WESLEY INGRAM	Title PETROLEUM ENGINEER	2010 Date 12/29/2010
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.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

**Federal BI 1
30-025-27068
COG Operating LLC
December 29, 2010
Conditions of Approval**

- 1. Operator to test casing to approved injection pressure after squeeze prior to installing packer and injection tubing. Test to be witnessed by BLM and charted for 30 minutes. Contact 575-393-3612 a minimum of 24 hours prior to test.**
- 2. Subsequent report required with all details of test to determine location of bad casing and amount of cement squeezed.**
- 3. Upon installation of injection equipment, 500 psi MIT to be performed and witnessed by NMOCD or BLM.**
- 4. BLM approval subject to like approval by state.**

WWI 122910