

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

Form C-104  
Revised August 1, 2011

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		<sup>2</sup> OGRID Number 229137
		<sup>3</sup> Reason for Filing Code/ Effective Date NW
<sup>4</sup> API Number 30 - 015-41614	<sup>5</sup> Pool Name Hackberry; Bone Spring, North	<sup>6</sup> Pool Code 97056
<sup>7</sup> Property Code 35819	<sup>8</sup> Property Name Blue Thunder 5 Federal Com	<sup>9</sup> Well Number 6H

II. <sup>10</sup> Surface Location

Ul or lot no. H	Section 5	Township 19S	Range 31E	Lot Idn	Feet from the 1740	North/South Line North	Feet from the 125	East/West line East	County Eddy
--------------------	--------------	-----------------	--------------	---------	-----------------------	---------------------------	----------------------	------------------------	----------------

<sup>11</sup> Bottom Hole Location

Ul or lot no. E	Section 5	Township 19S	Range 31E	Lot Idn	Feet from the 2021	North/South Line North	Feet from the 345	East/West line West	County Eddy
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code F	<sup>14</sup> Gas Connection Date 6/13/14	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
278421	Holly Refining & Marketing Company, LLC P.O. Box 159 Artesia, NM 88211-0159	O
36785	DCP Midstream, LP 10 Desta Dr - Suite 2500 Midland, TX 79705-4528	G
NM OIL CONSERVATION ARTESIA DISTRICT JUL 02 2014		

RECEIVED

IV. Well Completion Data

<sup>21</sup> Spud Date 3/17/14	<sup>22</sup> Ready Date 5/25/14	<sup>23</sup> TD 13375'	<sup>24</sup> PBSD 13375'	<sup>25</sup> Perforations 9032-13244'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size 17 1/2"	<sup>28</sup> Casing & Tubing Size 13 3/8"	<sup>29</sup> Depth Set 745'	<sup>30</sup> Sacks Cement 650 sx		
12 1/4"	9 5/8"	2705'	875 sx		
7 7/8"	5 1/2"	13370'	2850 sx		
	2 7/8"	8233'			

V. Well Test Data

<sup>31</sup> Date New Oil 6/6/14	<sup>32</sup> Gas Delivery Date 6/13/14	<sup>33</sup> Test Date 6/14/14	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 260#	<sup>36</sup> Csg. Pressure 110#
<sup>37</sup> Choke Size	<sup>38</sup> Oil 583	<sup>39</sup> Water 1093	<sup>40</sup> Gas 549		<sup>41</sup> Test Method Pumping

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: 

Printed name:  
Stormi Davis

Title:  
Regulatory Analyst

E-mail Address:  
sdavis@concho.com

Date:  
6/30/14

Phone:  
575-748-6946

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Pending BLM approvals will  
subsequently be reviewed  
and scanned

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
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 page 2.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. <b>NMNM100858</b>
2. Name of Operator <b>COG Operating LLC</b>		6. If Indian, Allottee, or Tribe Name
3a. Address <b>2208 W. Main Street Artesia, NM 88210</b>	3b. Phone No. (include area code) <b>575-748-6946</b>	7. If Unit or CA. Agreement Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>SHL: 1740' FNL &amp; 125' FEL, Unit H (SENE) Sec 5-T19S-R31E BHL: 2021' FNL &amp; 345' FWL, Unit E (SWNW) Sec 5-T19S-R31E</b>		8. Well Name and No. <b>Blue Thunder 5 Federal Com #6H</b>
Lat.  Long.		9. API Well No. <b>30-015-41614</b>
		10. Field and Pool, or Exploratory Area <b>Hackberry; Bone Spring, North</b>
		11. County or Parish, State <b>Eddy NM</b>

12. CHECK APPROPRIATE BOX(S) 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"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Drill Out/Set Tbg</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
<input type="checkbox"/> Final Abandonment Notice	<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 or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the 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 Notice shall be filed only after all requirements, including reclamatantion, have been completed, and the operator has determined that the site is ready for final inspection.)

5/30/14 to 6/3/14 Drill out all frac plugs. Circulate clean.

6/6/14 Set 2 7/8" 6.5# L-80 tbg @ 8233'. Place well on pump. Date of 1st production.

Accepted for record  
APD NMOCDD-7-14

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
JUL 02 2014

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

Name (Printed/ Typed)

Stormi Davis

Title:

Regulatory Analyst

Signature:

Date:

6/30/14

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by:

Title:

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 States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)

Pending BLM approvals will  
subsequently be reviewed  
and scanned

agency of the United

# NM OIL CONSERVATION

FORM APPROVED

OMB NO. 1004-0137

Expires: July 31, 2010

UNITED STATES ARTESIA DISTRICT  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

JUL 02 2014

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. LEASE DESIGNATION AND SERIAL NO.

NMNM100858

RECEIVED

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other  
b. Type of Completion ☒ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Diff. Resvr.

Other

2. Name of Operator  
COG Operating LLC

6. INDIAN ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT

8. FARM OR LEASE NAME  
Blue Thunder 5 Federal Com #6H

3. Address  
2208 W. Main Street  
Artesia, NM 88210

3a. Phone No. (include area code)

575-748-6940

9. API WELL NO.  
30-015-41614

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
At surface 1740' FNL & 125' FEL, Unit H (SENE) Sec 5-T19S-R31E

10. FIELD NAME  
Hackberry; Bone Spring, North

11. SEC. T. R. M., OR BLOCK AND SURVEY  
OR AREA 5 T 19S R 31E

12. COUNTY OR PARISH  
Eddy

13. STATE  
NM

At top prod. Interval reported below

At total depth 2021' FNL & 345' FWL, Unit E (SWNW) Sec 5-T19S-R31E

14. Date Spudded 3/17/14  
15. Date T.D. Reached 4/2/14  
16. Date Completed 5/25/14  
☐ D & A ☒ Ready to Prod.

17. ELEVATIONS (DF, RKB, RT, GR, etc.)\*  
3586' GR 3604' KB

18. Total Depth: MD 13375'  
TVD 8815'

19. Plug back T.D.: MD 13375'  
TVD 8815'

20. Depth Bridge Plug Set: MD  
TVD

21. Type Electric & other Logs Run (Submit a copy of each)  
None

22. Was well cored? ☒ No ☐ Yes (Submit analysis)  
Was DST run? ☒ No ☐ Yes (Submit report)  
Directional Survey? ☐ No ☒ Yes (Submit copy)

### 23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/ Grade	Wt. (#/ft.)	Top (MD)	Bottom(MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (Bbl)	Cement Top*	Amount Pulled
17 1/2"	13 3/8" J55	54.5#	0	745'	None	650 sx		0	None
12 1/4"	9 5/8" J55	36#	0	2705'	None	875 sx		0	None
7 7/8"	5 1/2" P110	17#	0	13370'	None	2850 sx		0	None

### 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 7/8"	8233'							

### 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. of Holes	Perf. Status
Bone Spring	9032'	13244'	9032-13244'	0.43	504	Open
B)						
C)						
D)						

### 26. Perforation Record

### 27. Acid, Fracture Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
See Attached	See Attached

### 28. Production- Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil Bbl	Gas MCF	Water Bbl	Oil Gravity Corr. API	Gas Gravity	Production Method
6/6/14	6/14/14	24	→	583	549	1093			Pumping
Choke Size	Tbg. Press Flwg. SI	Csg. Press.	24 Hr. Rate	Oil Bbl	Gas MCF	Water Bbl	Gas: Oil Ratio	Well Status	
	260#	110#	→	583	549	1093		Producing	

### 28a. Production- Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil Bbl	Gas MCF	Water Bbl	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press Flwg. SI	Csg. Press.	24 Hr. Rate	Oil Bbl	Gas MCF	Water Bbl	Gas: Oil Ratio	Well S	
			→						

\* See instructions and spaces for additional data on page 2)

Pending BLM approvals will subsequently be reviewed and scanned

## 28b. Production- Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil Bbl	Gas MCF	Water Bbl	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press Flwg. SI	Csg Press.	24 Hr. Rate	Oil Bbl	Gas MCF	Water Bbl	Gas: Oil Ratio	Well Status	
			→						

## 28c. Production- Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil Bbl	Gas MCF	Water Bbl	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press Flwg. SI	Csg Press.	24 Hr. Rate	Oil Bbl	Gas MCF	Water Bbl	Gas: Oil Ratio	Well Status	
			→						

## 29. Disposition of Gas (Sold, used for fuel, vented, etc.)

Sold

## 30. Summary of Porous Zones (include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests.

## 31. Formation (Log) Markers:

Formation	Top	Bottom	Descriptions Contents, Etc.	Name	Top
					Measured Depth
Delaware Bone Spring	4341'	6476'		Rustler	679'
	6477'	8815'		Top of Salt	757'
				Tansill	2225'
				Yates	2420'
				Seven Rivers	2684'
				Grayburg	3816'
				Cherry Canyon	4341'
				Brushy Canyon	4843'
				Bone Spring Lm	6477'
				1st Bone Spring	7819'
				2nd Bone Spring	8636'
					TVD 8815'

## 32. Additional remarks (include plugging procedure):

## 33. Indicate which items have been attached by placing a check in the appropriate boxes:

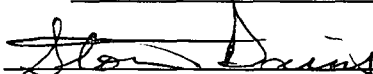
- ☐ Electrical/ Mechanical Logs (1 full set required)
 ☐ Geologic Report
 ☐ DST Report
 ☒ Directional Survey
- ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☒ Other: Deviation Report

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)\*

Name (please print) Stormi Davis

Title Regulatory Analyst

Signature



Date

6/30/14

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.

# BLUE THUNDER 5 FEDERAL COM #6H

30-015-41614

Sec 5-T19S-R31E

<u>Perfs</u>	<u>7 1/2% Acid (Gal)</u>	<u>Sand (#)</u>	<u>Fluid (Gal)</u>
13037-13244'	6027	450773	400050
12724-12934'	5999	455295	372624
12421-12626'	6024	452040	369600
12113-12314'	5999	450232	373338
11805-12018'	5999	446656	369012
11498-11710'	5999	449168	370272
11190-11400'	5999	449660	368550
10882-11087'	5999	451741	379092
10579-10779'	5982	450766	367458
10266-10472'	6024	450034	365148
9959-10158'	5999	449570	390852
9651-9856'	5940	453480	366072
9343-9548'	5982	446968	363384
9032-9240'	5999	447297	363426
<b>Totals</b>	<b>83971</b>	<b>6303680</b>	<b>5218878</b>

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
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 page 2.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM100858
2. Name of Operator COG Operating LLC		6. If Indian, Allottee, or Tribe Name
3a. Address 2208 W. Main Street Artesia, NM 88210	3b. Phone No. (include area code) 575-748-6946	7. If Unit or CA, Agreement Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL: 1740' FNL & 125' FEL, Unit H (SENE) Sec 5-T19S-R31E BHL: 2021' FNL & 345' FWL, Unit E (SWNW) Sec 5-T19S-R31E		8. Well Name and No. Blue Thunder 5 Federal Com #6H
Lat. Long.		9. API Well No. 30-015-41614
		10. Field and Pool, or Exploratory Area Hackberry; Bone Spring, North
		11. County or Parish, State Eddy NM

12. CHECK APPROPRIATE BOX(S) 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input checked="" 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 or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the 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 Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

**Required Information for the Disposal of Produced Water:**

- 1) Name of formation producing water on lease: Bone Spring
- 2) Amount of water produced in barrels per day: 1200 BWPD
- 3) How water is stored on lease: 2 - 500 bbl fiberglass tanks
- 4) How water is moved to disposal facility: Trucked
- 5) Disposal Facility:
  - a) Facility Operator Name: Mesquite SWD, Inc.
  - b) Name of facility or well name & number: Cedar Lake 36 State #1 (Order SWD-1275)
  - c) Type of facility or well: WDW
  - d) Location by 1/4, 1/4, Section, Township & Range: NESW, Sec 36-T17S-R30E

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
JUL 02 2014  
**RECEIVED**

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

Name (Printed/ Typed)

Stormi Davis

Title:

Regulatory Analyst

Signature:

Date:

6/30/14

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by:

Title:

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:

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

Pending BLM approvals will  
subsequently be reviewed  
and scanned

Agency of the United