

RECEIVED

JUL 08 2019

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

DISTRICT IV-ARTESIA O.C.D.

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

Form C-104  
Revised August 1, 2011

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 - 015-45168	<sup>5</sup> Pool Name Purple Sage; Wolfcamp (Gas)	<sup>6</sup> Pool Code 98220
<sup>7</sup> Property Code 322243	<sup>8</sup> Property Name Littlefield 33 Federal Com	<sup>9</sup> Well Number 807H

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

UI or lot no. 9	Section 33	Township 26S	Range 29E	Lot Idn	Feet from the 250	North/South Line South	Feet from the 841	East/West line West	County Eddy
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<sup>11</sup> Bottom Hole Location

UI or lot no. D	Section 28	Township 26S	Range 29E	Lot Idn	Feet from the 201	North/South Line North	Feet from the 1241	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 6/3/19	<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
	ACC	O
	Delaware Basin Midstream 9950 Woodlock Forrest Dr The Woodlands, TX 77380	G
	Holly Refining and Marketing Co.	O

## IV. Well Completion Data

<sup>21</sup> Spud Date 11/10/18	<sup>22</sup> Ready Date 6/3/19	<sup>23</sup> TD 17883'	<sup>24</sup> PBTD 17650'	<sup>25</sup> Perforations 10,982-17,690'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size 14 3/4"	<sup>28</sup> Casing & Tubing Size 10 3/4"	<sup>29</sup> Depth Set 578'	<sup>30</sup> Sacks Cement 750		
9 7/8"	7 5/8"	10165'	2484		
6 3/4"	5 1/2"	17823'	1583		
	2 7/8"	10095			

## V. Well Test Data

<sup>31</sup> Date New Oil 6/3/19	<sup>32</sup> Gas Delivery Date 6/3/19	<sup>33</sup> Test Date 6/3/19	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 3439#	<sup>36</sup> Csg. Pressure 2970#
<sup>37</sup> Choke Size 26/64"	<sup>38</sup> Oil 224	<sup>39</sup> Water 2408	<sup>40</sup> Gas 2582		<sup>41</sup> Test Method Flowing

<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: *Amanda Avery*

Printed name:  
Amanda Avery

Title:  
Regulatory Analyst

E-mail Address:  
aavery@concho.com

Date:  
6/27/19

Phone:  
575-748-6962

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 MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**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.*5. Lease Serial No.  
NMLC065928A

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator  
COG OPERATING LLCContact: AMANDA AVERY  
E-Mail: aavery@concho.com8. Well Name and No.  
LITTLEFIELD 33 FEDERAL COM 807H9. API Well No.  
30-015-451683a. Address  
2208 W MAIN STREET  
ARTESIA, NM 882103b. Phone No. (include area code)  
Ph: 575-748-694010. Field and Pool or Exploratory Area  
PURPLE SAGE; WOLFCAMP GAS

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

Sec 33 T26S R29E Mer NMP SWNW 250FSL 841FWL  
32.000803 N Lat, 103.995484 W Lon

11. County or Parish, State

EDDY COUNTY, NM

**12. CHECK THE APPROPRIATE BOX(ES) 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"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Hydraulic Fracture
	<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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

2/25/19 Test annulus to 1500# Set Composite Bridge plug @ 17,798' and test csg to 11,232#. Perf 17,773-17,783' Injection test.  
3/23/19 to 4/1/19 Perf 10,982-17,690' (1368). Acdd w/61,152 gal 7 1/2%; frac w/ 13,705,514# sand & 12,507,726 gal fluid.  
4/27/19 to 4/28/19 Drilled out CFP's. Clean down to PBTD @17,650'.

5/10/19 -5/12/19 Set 2 7/8" 6.5# L-80 tbg @ 10,095' packer @ 10,085'. Installed gas lift system.

6/3/19 Began flowing back & testing. Date of first production.

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DISTRICT II-ARTESIA O.C.D.

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

Electronic Submission #472197 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad

Name (Printed/Typed) AMANDA AVERY

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 07/03/2019

**THIS SPACE FOR FEDERAL OR STATE OFFICIAL APPROVAL**

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

Pending BLM approvals will  
subsequently be reviewed  
and scanned

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)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

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Form 3160-4  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

DISTRICT ARTESIA O.C.D.

1a. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other			6. If Indian, Allottee or Tribe Name		
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____			7. Unit or CA Agreement Name and No.		
2. Name of Operator COG OPERATING LLC			8. Lease Name and Well No. LITTLEFIELD 33 FEDERAL COM 807H		
3. Address 2208 W MAIN STREET ARTESIA, NM 88210			9. API Well No. 30-015-45168		
3a. Phone No. (include area code) Ph: 575-748-6940			10. Field and Pool, or Exploratory PURPLE SAGE; WOLFCAMP GAS		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 33 T26S R29E Mer NMP At surface SWNW Lot 9 250FSL 841FWL 32.000803 N Lat, 103.995484 W Lon Sec 33 T26S R29E Mer NMP At top prod interval reported below SWNW Lot 9 250FSL 841FWL 32.000803 N Lat, 103.995484 W Lon Sec 28 T26S R29E Mer NMP At total depth NWNW Lot D 201FNL 1241FWL 32.020593 N Lat, 103.993908 W Lon			11. Sec., T., R., M., or Block and Survey or Area Sec 33 T26S R29E Mer NMP		
14. Date Spudded 11/10/2018			15. Date T.D. Reached 12/05/2018		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 06/03/2019			17. Elevations (DF, KB, RT, GL)* 2863 GL		
18. Total Depth: MD 17883 TVD 10863		19. Plug Back T.D.: MD 17650 TVD 10863		20. Depth Bridge Plug Set: MD 17798 TVD 10863	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)			22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)		

## 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 Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14.750	10.750 L80	45.5	0	578		750		0	
9.875	7.625 L80	29.7	0	10165	2705	2484		0	
6.750	5.500 P110	23.0	0	17823		1583		0	

## 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	10095	10085						

## 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	10982	17690	10982 TO 17690		1368	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
10982 TO 17690	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
06/03/2019	06/03/2019	24	→	224.0	2582.0	2408.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
24/64	3439	2970.0	→	224	2582	2408		PGW	

## 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 Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #472199-VERIFIED BY THE BLM WELL INFORMATION

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED

\*\* OPERATOR-SUBMITTED \*\*

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, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
LAMAR	2697			LAMAR	2697
BELL CANYON	2766			BELL CANYON	2766
CHERRY CANYON	3645			CHERRY CANYON	3645
BRUSHY CANYON	4981			BRUSHY CANYON	4981
BONE SPRING LIMESTONE	6468			BONE SPRING LIMESTONE	6468
1ST BONE SPRING	7402			1ST BONE SPRING	7402
2ND BONE SPRING	8214			2ND BONE SPRING	8214
3RD BONE SPRING	9276			3RD BONE SPRING	9276

32. Additional remarks (include plugging procedure):  
WOLFCAMP 9608

## 33. Circle enclosed attachments:

- |   |                    |               |                       |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.)     | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis   | 7. Other:     |                       |

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

**Electronic Submission #472199 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Carlsbad**

Name (please print) AMANDA AVERYTitle AUTHORIZED REPRESENTATIVE

Signature \_\_\_\_\_ (Electronic Submission)

Date 07/03/2019

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.

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***