

Submit To Appropriate District Office Two Copies 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		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>		<b>Form C-105</b> Revised August 1, 2011	
		1. WELL API NO.		30-025-40410 ✓	
		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN			
		3. State Oil & Gas Lease No.			
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>					
4. Reason for filing:  <input type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)				5. Lease Name or Unit Agreement Name <b>RED HILLS WEST 16 STATE</b> 6. Well Number: <b>1H</b>	
7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER				8. Name of Operator <b>ConocoPhillips Company</b>	
9. OGRID <b>217817</b>				<b>RECEIVED</b>	
10. Address of Operator <b>P.O. Box 51810 Midland, TX 79710</b>				11. Pool name or Wildcat <b>JENNINGS; UPPER BONE SPRING SHALE</b>	
12. Location	Unit Ltr	Section	Township	Range	Lot
Surface:	D	16	26S	32E	
BH:	M	16	26S	32E	
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released		16. Date Completed (Ready to Produce)	
08/24/2012	09/14/2012	07/24/2013		07/24/2013	
17. Elevations (DF and RKB, RT, GR, etc.) 3201					
18. Total Measured Depth of Well 13,434'		19. Plug Back Measured Depth 13,434'		20. Was Directional Survey Made?	
				21. Type Electric and Other Logs Run CBL	
22. Producing Interval(s), of this completion - Top, Bottom, Name 8,894', 13434', AVALON					
<b>23. CASING RECORD (Report all strings set in well)</b>					
CASING SIZE		WEIGHT LB./FT.		DEPTH SET	
13 3/8"		54.5#		793'	
9 5/8"		36#		4479'	
7"		29#		9340'	
24. LINER RECORD			25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	
4 1/2"	8805'	13419'			
26. Perforation record (interval, size, and number) 9453'-13,292'			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.		
			DEPTH INTERVAL		
			AMOUNT AND KIND MATERIAL USED		
			9453'-13,292'		
			TOTAL PROPPANTS=2,049,560		
<b>28. PRODUCTION</b>					
Date First Production 07/29/2013		Production Method (Flowing, gas lift, pumping - Size and type pump) PUMPING			Well Status (Prod. or Shut-in) PRODUCING
Date of Test 07/29/2013	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 800	Gas - MCF 650
				Water - Bbl. 2400	Gas - Oil Ratio
Flow Tubing Press. 1350	Casing Pressure 1375	Calculated 24-Hour Rate	Oil - Bbl. 800	Gas - MCF 650	Water - Bbl. 2400
					Oil Gravity - API - (Corr.) 49
29. Disposition of Gas (Sold, used for fuel, vented, etc.)					30. Test Witnessed By
31. List Attachments					
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.					
33. If an on-site burial was used at the well, report the exact location of the on-site burial:					
Latitude		Longitude		NAD 1927 1983	
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief					
Signature <i>Ashley Bergen</i>		Printed Name Ashley Bergen		Title Staff Regulatory Technician Date 07/29/2013	
E-mail Address ashley.bergen@cop.com					

SEP 05 2013

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinebry	T. Gr. Wash	T. Dakota	
T. Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo	T.	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....  
No. 2, from.....to.....

No. 3, from.....to.....  
No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....  
 No. 2, from.....to.....feet.....  
 No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology
8273	8503		BONE SPRING
8503	8894		BONE SPRING 1ST CARBONATE
8894	13434		AVALON