

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 - 025-42338	<sup>5</sup> Pool Name WC-025 G-07 S203506D; Bone Spring	<sup>6</sup> Pool Code 97983
<sup>7</sup> Property Code 313978	<sup>8</sup> Property Name Blue Jay Federal	<sup>9</sup> Well Number 1H

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

Ul or lot no. O	Section 18	Township 20S	Range 35E	Lot Idn	Feet from the 190	North/South Line South	Feet from the 2310	East/West line East	County Lea
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<sup>11</sup> Bottom Hole Location

Ul or lot no. B	Section 18	Township 20S	Range 35E	Lot Idn	Feet from the 414	North/South Line North	Feet from the 2245	East/West line East	County Lea
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code F	<sup>14</sup> Gas Connection Date 6/7/16	<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
	Alpha Crude Connector Pipeline	O
24650	Targa Midstream Services, LP 1000 Louisiana - Ste 4700 Houston, TX 77002	G

IV. Well Completion Data

<sup>21</sup> Spud Date 8/13/15	<sup>22</sup> Ready Date 6/1/16	<sup>23</sup> TD 15976'	<sup>24</sup> PBDT 15895'	<sup>25</sup> Perforations 11596-15855'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/8"	1895'	1240		
12 1/4"	9 5/8"	5799'	2110		
8 3/4"	5 1/2"	15946'	2340		
	2 7/8"	10974'			

V. Well Test Data

<sup>31</sup> Date New Oil 6/7/16	<sup>32</sup> Gas Delivery Date 6/7/16	<sup>33</sup> Test Date 6/25/16	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 1900#	<sup>36</sup> Csg. Pressure 1600#
<sup>37</sup> Choke Size 25/64"	<sup>38</sup> Oil 1451	<sup>39</sup> Water 2330	<sup>40</sup> Gas 1621		<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:

Printed name:  
Stormi Davis

Title:  
Regulatory Analyst

E-mail Address:  
sdavis@concho.com

Date:  
7/5/16

Phone:  
575-748-6946

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Petroleum Engineer

07/15/16



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM119759
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: STORMI DAVIS E-Mail: sdavis@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 2208 WEST MAIN ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946	8. Well Name and No. BLUE JAY FEDERAL 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 18 T20S R35E Mer NMP SWSE 190FSL 2310FEL		9. API Well No. 30-025-42338
		10. Field and Pool, or Exploratory WC-025 G-07 S203506D; BS
		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 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"/> 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
	<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.)

9/22/15 Test annulus to 1500#. Ran CBL. TOC @ 1020'. Set CBP @ 15895'. Test csg to 8443# for 30 mins. Good test. Perf 15845-15855' (60). Injection test.

5/7/16 to 5/22/16 Perf Bone Spring 11596-15754' (1260). Acdz w/108,240 gal 7 1/2% acid; Frac w/8,224,168# sand & 11,707,002 gal fluid.

5/23/16 to 5/26/16 Drilled out all CFP's. Clean down to CBP.

5/31/16 to 6/1/16 Set 2 7/8" 6.5# L-80 tbg @ 10974' & pkr @ 10910'.  
6/4/16 Began flowing back & testing.

6/7/16 Date of first production.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #343781 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs</b>	
Name (Printed/Typed) STORMI DAVIS	Title PREPARER
Signature (Electronic Submission)	Date 07/05/2016

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

Approved By _____	Title _____	Date _____
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 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.

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



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OCD

JUL 11 2016

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

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other			5. Lease Serial No. NMNM119759		
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 _____			6. If Indian, Allottee or Tribe Name		
2. Name of Operator COG OPERATING LLC			8. Lease Name and Well No. BLUE JAY FEDERAL 1H		
3. Address 2208 WEST MAIN ARTESIA, NM 88210			9. API Well No. 30-025-42338		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface SWSE 190FSL 2310FEL At top prod interval reported below Sec 18 T20S R35E Mer NMP At total depth NWNE 414FNL 2245FEL			10. Field and Pool, or Exploratory WC-025 G-07 S203506D; BS		
14. Date Spudded 08/13/2015			11. Sec., T., R., M., or Block and Survey or Area Sec 18 T20S R35E Mer NMP		
15. Date T.D. Reached 09/12/2015			12. County or Parish LEA		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 06/01/2016			13. State NM		
17. Elevations (DF, KB, RT, GL)* 3672 GL					
18. Total Depth: MD 15976 TVD 11323			19. Plug Back T.D.: MD 15895 TVD 11328		
20. Depth Bridge Plug Set: MD 15895 TVD 11328					
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CNL; LATEROLOG; SONIC			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
17.500	13.375 J55	54.5	0	1895		1240		0	
12.250	9.625 J55	36.0	0	5799	3951	2110		0	
8.750	5.500 P110	17.0	0	15946		2340		1020	

## 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	10974	10910						

## 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	11596	15855	11596 TO 15754	0.430	1260	OPEN
B)			15845 TO 15855		60	OPEN
C)						
D)						

## 26. Perforation Record

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

Depth Interval	Amount and Type of Material
11596 TO 15754	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
06/07/2016	06/25/2016	24	→	1451.0	1621.0	2330.0			FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg. 1900 SI	Csg. Press. 1600.0	24 Hr. Rate →	Oil BBL 1451	Gas MCF 1621	Water BBL 2330	Gas:Oil Ratio	Well Status	POW

## 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 #343788 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

Accepted for Record Only



## 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
BONE SPRING LM	8439	9773		RUSTLER	1844
1ST BONE SPRING	9774	10569		TOS	1935
2ND BONE SPRING	10570	11376		BONE SPRING LM	8439
3RD BONE SPRING	11377	11500		1ST BONE SPRING	9774
WOLFCAMP	11501	11686		2ND BONE SPRING	10570
				3RD BONE SPRING	11377
				WOLFCAMP	11501

32. Additional remarks (include plugging procedure):  
Logs, Surveys & perms/stimulation are attached.

## 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 #343788 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Hobbs**

Name (please print) STORMI DAVISTitle PREPARER

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

Date 07/05/2016

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 \*\***