

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

HOBBS OCD

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 229137
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-45099	⁵ Pool Name Berry; Bone Spring, North	⁶ Pool Code 5535
⁷ Property Code 322258	⁸ Property Name Little Bear Federal Com	⁹ Well Number 3H

II. ¹⁰ Surface Location

UI or lot no. O	Section 33	Township 20S	Range 34E	Lot Idn	Feet from the 696	North/South Line South	Feet from the 2167	East/West line East	County Lea
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¹¹ Bottom Hole Location

UI or lot no. J	Section 28	Township 20S	Range 34E	Lot Idn	Feet from the 2440	North/South Line South	Feet from the 2316	East/West line East	County Lea
¹² Lse Code F	¹³ Producing Method Code F	¹⁴ Gas Connection Date 6/21/19	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
	ACC	O
	Targa Midstream Services, LP 1000 Louisiana Ste 4700 Houston, TX 77002	G
	Holly Refining and Marketing Co.	O

IV. Well Completion Data

²¹ Spud Date 12/1/18	²² Ready Date 6/21/19	²³ TD 18492'	²⁴ PBDT 18126'	²⁵ Perforations 11,552-18,370'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	1855'	1400		
12 1/4"	9 5/8"	5732'	2600		
8 3/4"	5 1/2"	18469'	3600		
	2 7/8"	11040'			

V. Well Test Data

³¹ Date New Oil 6/21/19	³² Gas Delivery Date 6/21/19	³³ Test Date 6/21/19	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 2300#	³⁶ Csg. Pressure 1500#
³⁷ Choke Size 24/64"	³⁸ Oil 117	³⁹ Water 1764	⁴⁰ Gas 109		⁴¹ Test Method Flowing

⁴² 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:
7/29/19

Phone:
575-748-6962

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Documents pending BLM approvals
will subsequently be reviewed and
scanned.

HOBBS OCD**AUG 01 2019****WELL COMPLETION OR RECOMPLETION REPORT AND LOG**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

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. NMNM0000082		
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			Contact: AMANDA AVERY E-Mail: aaavery@concho.com		
3. Address 2208 W MAIN STREET ARTESIA, NM 88210			3a. Phone No. (include area code) Ph: 575-748-6940		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface Sec 33 T20S R34E Mer NMP SWSE Lot O 696FSL 2167FEL 32.524238 N Lat, 103.563672 W Lon At top prod interval reported below Sec 33 T20S R34E Mer NMP SWSE Lot O 696FSL 2167FEL 32.524238 N Lat, 103.563672 W Lon At total depth NWSE Lot J 2440FSL 2316FEL 32.543557 N Lat, 103.564179 W Lon			8. Lease Name and Well No. LITTLE BEAR FEDERAL COM 3H		
14. Date Spudded 12/01/2018			15. Date T.D. Reached 12/26/2018		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 06/21/2019			9. API Well No. 30-025-45099		
18. Total Depth: MD 18492 TVD 11303			20. Depth Bridge Plug Set: MD 18395 TVD 11303		
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
17.500	13.375 J55	54.5	0	1855		1400		0	
12.250	9.625 L80	40.0	0	5732	3881	2600		0	
8.750	5.500 P110	20.0	0	18469		3600		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	11040	11030						

25. Producing Intervals *

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	11552	18370	11552 TO 18370		1050	OPEN
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
11552 TO 18370	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
06/21/2019	06/21/2019	24	→	117.0	109.0	1764.0			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	2300	1500.0	→	117	109	1764		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 #475556 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

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
RUSTLER	1762			RUSTLER	1762
TOP OF SALT	2164			TOP OF SALT	2164
BOTTOM OF SALT	3592			BOTTOM OF SALT	3592
BRUSHY CANYON	8427			BRUSHY CANYON	8427
BONE SPRING LIMESTONE	8803			BONE SPRING LIMESTONE	8803
1ST BONE SPRING	9855			1ST BONE SPRING	9588
2ND BONE SPRING	10348			2ND BONE SPRING	10348
3RD BONE SPRING	11253			3RD BONE SPRING	11253

32. Additional remarks (include plugging procedure):

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 #475556 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs

Name (please print) AMANDA AVERYTitle AUTHORIZED REPRESENTATIVESignature (Electronic Submission)Date 07/29/2019

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 ****

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.
NMNM0000082

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 28. Well Name and No.
LITTLE BEAR FEDERAL COM 3H9. API Well No.
30-025-4509910. Field and Pool or Exploratory Area
BERRY; BONE SPRING, NORTH11. County or Parish, State
LEA COUNTY, NM1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
COG OPERATING LLC
Contact: AMANDA AVERY
E-Mail: aaavery@concho.com3a. Address
2208 W MAIN STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-69404. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 33 T20S R34E Mer NMP SWSE 696FSL 2167FEL
32.524238 N Lat, 103.563672 W Lon**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 recomple 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 recomple 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.

3/15/19 Test annulus to 1500# Set Composite Bridge plug @ 18,395' and test csg to 9495#. Good test.

4/29/19 to 5/13/19 Perf 11,552-18,370' (1050). Acdd w/53,634 gal 7 1/2%; frac w/ 14,041,854# sand & 11,765,712 gal fluid.

5/26/19 to 5/27/19 Drilled out CFP's. Clean down to PBTD @18,126'.

6/1/19 6/8/19 Set 2 7/8" 6.5# L-80 tbg @ 11,040' packer @ 11,030'. Installed gas lift system.

6/21/19 Began flowing back & testing. Date of first production.

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

**Electronic Submission #475558 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs**

Name (Printed/Typed) AMANDA AVERY

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 07/29/2019

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.

(Instructions on page 2)

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