

Submit To Appropriate District Office Two Copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 811 S. First St., Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 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.		30-025-41977						
		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:				5. Lease Name or Unit Agreement Name						
<input checked="" 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)				Magnum Pronto State 6. Well Number: <b>HOBBSOCD</b> 6H <b>JAN 20 2015</b>						
7. Type of Completion:				9. OGRID						
<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				229137 <b>RECEIVED</b>						
8. Name of Operator				11. Pool name or Wildcat						
COG Operating LLC				Lusk; Bone Spring, South						
10. Address of Operator										
2208 W. Main Street										
Artesia, NM 88210										
12. Location	Unit Ltr	Section	Township	Range	Lot	90	N/S Line	Feet from the	E/W Line	County
<b>Surface:</b>	D	32	19S	32E		190	North	330	West	Lea
<b>BH:</b>	M	32	19S	32E		342 415	South	394	West	Lea
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released		16. Date Completed (Ready to Produce)		17. Elevations (DF and RKB, RT, GR, etc.)		3544' GR		
10/12/14	10/26/14	10/28/14		12/9/14						
18. Total Measured Depth of Well		19. Plug Back Measured Depth		20. Was Directional Survey Made?		21. Type Electric and Other Logs Run		None		
13750'		13747'		Yes						
22. Producing Interval(s), of this completion - Top, Bottom, Name										
9464-13660' Bone Spring										
<b>CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13 3/8"		54.5#		875'		17 1/2"		675 sx		0
9 5/8"		36#		4087'		12 1/4"		2150 sx		0
5 1/2"		17#		13750'		7 7/8"		2450 sx		0
<b>24. LINER RECORD      25. TUBING RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET			
					2 7/8"	8748'				
26. Perforation record (interval, size, and number)					27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.					
9464-13600' (540) 13650-13660' (60)					DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED			
					9464-13600'		Acdz w/91713 gal 7 1/2%; Frac w/6783790# sand & 5716184 gal fluid			
<b>28. PRODUCTION</b>										
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)				
12/13/14		Pumping				Producing				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio			
12/20/14	24			798	300	1913				
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)				
240#	130#		798	300	1913					
29. Disposition of Gas (Sold, used for fuel, vented, etc.)						30. Test Witnessed By				
Flared						Tyler Deans				
31. List Attachments										
Surveys										
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		Printed Name:		Title		Date:				
		Stormi Davis		Regulatory Analyst		1/7/15				
E-mail Address: sdavis@concho.com										

**JAN 20 2015**

# 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_____944'	T. Strawn_____	T. Kirtland_____	T. Penn. "B"_____
B. Salt_____	T. Atoka_____	T. Fruitland_____	T. Penn. "C"_____
T. Yates_____2579'	T. Miss_____	T. Pictured Cliffs_____	T. Penn. "D"_____
T. 7 Rivers_____2813'	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. Rustler_____855'	Base Greenhorn_____	T. Granite_____
T. Blinebry_____	T. Capitan_____2958'	T. Dakota_____	
T. Tubb_____	T. Cherry Canyon_____4420'	T. Morrison_____	
T. Drinkard_____	T. Brushy Canyon_____5656'	T. Todilto_____	
T. Abo_____	T. Bone Spring Lm_____7157'	T. Entrada_____	
T. Wolfcamp_____	T. 1 <sup>st</sup> Bone Spring_____8370'	T. Wingate_____	
T. Penn_____	T. 2 <sup>nd</sup> Bone Spring_____9094'	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