

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  
Santa Fe, NM 87505

**HOBBS OGD**

Submit one copy to appropriate District Office

APR 22 2019

☒ AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND A RECEPTION 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 - 025-44814	<sup>5</sup> Pool Name Bobcat Draw; Upper Wolfcamp	<sup>6</sup> Pool Code 98094
<sup>7</sup> Property Code 321209	<sup>8</sup> Property Name Dominator 25 Federal Com	<sup>9</sup> Well Number 601H

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

Ul or lot no. P	Section 25	Township 25S	Range 33E	Lot Idn	Feet from the 280	North/South Line South	Feet from the 630	East/West line East	County Lea
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**<sup>11</sup> Bottom Hole Location**

Ul or lot no. A	Section 25	Township 25S	Range 33E	Lot Idn	Feet from the 202	North/South Line North	Feet from the 511	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 2/22/19	<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
298751	ETC	G

**IV. Well Completion Data**

<sup>21</sup> Spud Date 8/5/18	<sup>22</sup> Ready Date 2/22/19	<sup>23</sup> TD 17,210'	<sup>24</sup> PBDT 17,145'	<sup>25</sup> Perforations 12,786-17,140'	<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		
14 3/4"	10 3/4"	1210'	1010		
9 7/8"	7 5/8"	11904'	2150		
6 3/4"	5 1/2"	17200'	1485		
	2 7/8"	11436'			

**V. Well Test Data**

<sup>31</sup> Date New Oil 2/22/19	<sup>32</sup> Gas Delivery Date 2/22/19	<sup>33</sup> Test Date 2/22/19	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 3200#	<sup>36</sup> Csg. Pressure 2400#
<sup>37</sup> Choke Size 17/64"	<sup>38</sup> Oil 247	<sup>39</sup> Water 1455	<sup>40</sup> Gas 158		<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:  
04/17/19

Phone:  
575-748-6962

OIL CONSERVATION DIVISION

Approved by:

*Karen Sharp*

Title:

*Staff Mgr*

Approval Date:

*4-30-19*

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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM114987
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: AMANDA AVERY E-Mail: aavery@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6940	8. Well Name and No. DOMINATOR 25 FEDERAL COM 601H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T25S R33E Mer NMP SESE 280FSL 630FEL 32.095032 N Lat, 103.519561 W Lon		9. API Well No. 30-025-44814
		10. Field and Pool or Exploratory Area BOBCAT DRAW; WOLFCAMP
		11. County or Parish, State LEA 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 Hydraulic Fracture
	<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 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.

11/11/18 Test annulus to 1500# Set CBP @ 17,165' and test csg to 11,180#. Good test.

12/3/18 to 12/10/18 Perf 12,786-17,140' (800). Acdz w/71,670 gal 7 1/2%; frac w/ 8,936,440# sand & 8,002,851 gal fluid.

1/16/19 - 1/17/19 Drilled out CFP's. Clean down to PBD @ 17,146'.

1/23/19 Set 2 7/8" 6.5# L-80 tbg @ 11,436' packer @ 11,426'. Installed gas lift system.

2/22/19 Began flowing back & testing. Date of first production.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #461800 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs</b>	
Name (Printed/Typed) AMANDA AVERY	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 04/17/2019

**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 to make any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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

Documents pending BLM approvals will be reviewed and scanned subsequently.

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**

5. Lease Serial No.  
NMNM114987

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other  
b. Type of Completion ☒ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff. Resvr.  
Other \_\_\_\_\_

2. Name of Operator  
COG OPERATING LLC Contact: AMANDA AVERY  
E-Mail: aavery@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 SESE Lot P 280FSL 630FEL 32.095032 N Lat, 103.519561 W Lon  
At top prod interval reported below SESE Lot P 280FSL 630FEL 32.095032 N Lat, 103.519561 W Lon  
At total depth NENE Lot A 202FNL 511FEL 32.108207 N Lat, 103.519175 W Lon

6. If Indian, Allottee or Tribe Name  
7. Unit or CA Agreement Name and No.  
8. Lease Name and Well No.  
DOMINATOR 25 FEDERAL COM 601H  
9. API Well No.  
30-025-44814  
10. Field and Pool, or Exploratory  
BOBCAT DRAW; WOLFCAMP  
11. Sec., T., R., M., or Block and Survey  
or Area Sec 25 T25S R33E Mer NMP  
12. County or Parish  
LEA 13. State  
NM  
14. Date Spudded  
08/05/2018 15. Date T.D. Reached  
10/05/2018 16. Date Completed  
☐ D & A ☒ Ready to Prod.  
02/22/2019  
17. Elevations (DF, KB, RT, GL)\*  
3323 GL  
18. Total Depth: MD 17210  
TVD 12550 19. Plug Back T.D.: MD 17145  
TVD 12550 20. Depth Bridge Plug Set: MD 17165  
TVD 12550  
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)  
22. Was well cored? ☒ No ☐ Yes (Submit analysis)  
Was DST run? ☒ No ☐ Yes (Submit analysis)  
Directional Survey? ☐ No ☒ 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 Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14.750	10.750 L80	45.5	0	1210		1010		0	
9.875	7.625 L80	29.7	0	11904	5086	2150		0	
6.750	5.500 P110	23.0	0	17200		1485		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	11436	11426						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	12786	17140	12786 TO 17140		800	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
12786 TO 17140	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
02/22/2019	02/22/2019	24	→	247.0	158.0	1455.0			GAS LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
17/64	SI 3200	2400.0	→	247	158	1455		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.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→					W	

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

ELECTRONIC SUBMISSION #461801 VERIFIED BY THE BLM WELL INFORMATION SYSTEM  
\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPI

Documents 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
RUSTLER	1023			RUSTLER	1023
TOP OF SALT	1385			TOP OF SALT	1385
BOTTOM OF SALT	4925			BOTTOM OF SALT	4925
LAMAR	5169			LAMAR	5169
BELL CANYON	5209			BELL CANYON	5209
CHERRY CANYON	6225			CHERRY CANYON	6225
BRUSHY CANYON	7843			BRUSHY CANYON	7843
BONE SPRING LIMESTONE	9347			BONE SPRING LIMESTONE	9347

## 32. Additional remarks (include plugging procedure):

1ST BONE SPRING 10323  
2ND BONE SPRING 10887  
3RD BONE SPRING 11933  
WOLFCAMP 12500

## 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 #461801 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Hobbs

Name (please print) AMANDA AVERY

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 04/17/2019

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 \*\***