

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

Form C-104  
Revised August 1, 2011

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 - 025-45110	<sup>5</sup> Pool Name WC-025 G-09 S243532M; WOLFBONE	<sup>6</sup> Pool Code 98098
<sup>7</sup> Property Code 322259	<sup>8</sup> Property Name Fascinator Federal Com	<sup>9</sup> Well Number 604H

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

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
1	30	24S	35E		210	North	360	West	Lea

<sup>11</sup> Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
4	31	24S	35E		200	South	327	West	Lea
<sup>12</sup> Lse Code P	<sup>13</sup> Producing Method Code F	<sup>14</sup> Gas Connection Date 10/08/19	<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
	Targa	G
	Holly Refining and Marketing Co.	O

IV. Well Completion Data

<sup>21</sup> Spud Date 11/7/18	<sup>22</sup> Ready Date 10/8/19	<sup>23</sup> TD 22363'	<sup>24</sup> PBSD 22250'	<sup>25</sup> Perforations 12,720-22,225'	<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"	1173'	1000		
12 1/4"	9 5/8"	11855'	2765		
8 1/2"	5 1/2"	22336'	4090		
	2 7/8	11918'			

V. Well Test Data

<sup>31</sup> Date New Oil 10/8/19	<sup>32</sup> Gas Delivery Date 10/8/19	<sup>33</sup> Test Date 10/8/19	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 2000#	<sup>36</sup> Csg. Pressure 1500#
<sup>37</sup> Choke Size 27/64	<sup>38</sup> Oil 1178	<sup>39</sup> Water 3278	<sup>40</sup> Gas 1822		<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: 10/18/19

Phone:

575-748-6962

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

10/24/2019

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.  
NMNM14164

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
FASCINATOR FEDERAL COM 604H9. API Well No.  
30-025-4511010. Field and Pool or Exploratory Area  
WC-025 G-09 S243532M; WO11. County or Parish, State  
LEA COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator  
COG OPERATING LLCContact: AMANDA AVERY  
E-Mail: aavery@concho.com3a. Address  
2208 W MAIN STREET  
ARTESIA, NM 882103b. Phone No. (include area code)  
Ph: 575-748-6940

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 30 T24S R35E Mer NMP NWNW 210FNL 360FWL  
32.195169 N Lat, 103.413992 W Lon

## 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## TYPE OF SUBMISSION

- ☐
- Notice of Intent
- 
- ☒
- Subsequent Report
- 
- ☐
- Final Abandonment Notice

## TYPE OF ACTION

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen               | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off   |
| <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity   |
| <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 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.

3/22/19 Test annulus to 1500# Set Composite Bridge plug @ 22,250' and test csg to 11,623#. Test Good.

5/28/19 to 6/19/19 Perf 12,720-22,225' (1536). Acdz w/124,997 gal 7 1/2%; frac w/ 19,261,003# sand &amp; 15,776,544 gal fluid.

8/14/19 to 8/15/19 Drilled out CFP's. Clean down to PBTD @ 22,250'.

8/19/19 -8/22/19 Set 2 7/8" 6.5# L-80 tbg @ 11,918' packer @ 11,908'. Installed gas lift system.

10/08/19 Began flowing back &amp; testing Date of first production

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

Electronic Submission #488906 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs

Name (Printed/Typed) AMANDA AVERY

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 10/21/2019

## 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 \*\***

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTHOBBS OCD  
OCT 23 2019  
RECEIVEDFORM 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. NMNM14164		
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			7. Unit or CA Agreement Name and No.		
Contact: AMANDA AVERY E-Mail: aavery@concho.com			8. Lease Name and Well No. FASCINATOR FEDERAL COM 604H		
3. Address 2208 W MAIN STREET ARTESIA, NM 88210			9. API Well No. 30-025-45110		
3a. Phone No. (include area code) Ph: 575-748-6940			10. Field and Pool, or Exploratory WC-025 G-09 S243532M; WOL		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 30 T24S R35E Mer NMP At surface NWNW Lot 1 210FNL 360FWL 32.195169 N Lat, 103.413992 W Lon Sec 30 T24S R35E Mer NMP At top prod interval reported below NWNW Lot 1 210FNL 360FWL 32.195169 N Lat, 103.413992 W Lon Sec 31 T24S R35E Mer NMP At total depth SWSW Lot 4 200FSL 327FWL			11. Sec., T., R., M., or Block and Survey or Area Sec 30 T24S R35E Mer NMP		
14. Date Spudded 11/07/2018			15. Date T.D. Reached 12/18/2018		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 10/08/2019			17. Elevations (DF, KB, RT, GL)* 3374 GL		
18. Total Depth: MD 22363 TVD 12610			19. Plug Back T.D.: MD 22250 TVD 12610		
20. Depth Bridge Plug Set: MD 22250 TVD 12610			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 K55	54.5	0	1173		1010		0	
12.250	9.625 L80	57.0	0	11855	5456	2765		0	
8.500	5.500 P110	23.0	0	22336		4090		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	11918	11908						

## 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFBONE	12720	22225	12720 TO 22225		1536	OPEN
B)						
C)						
D)						

## 26. Perforation Record

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

Depth Interval	Amount and Type of Material
12720 TO 22225	SEE ATTACHED INFORMATION

## 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
10/08/2019	10/08/2019	24	→	1178.0	1822.0	3278.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. 2000 SI	Csg. Press. 1500.0	24 Hr. Rate →	Oil BBL 1178	Gas MCF 1822	Water BBL 3278	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 #488908 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	908			RUSTLER	908
TOP OF SALT	1380			TOP OF SALT	1380
BOTTOM OF SALT	5185			BOTTOM OF SALT	5185
LAMAR	5501			LAMAR	5501
BELL CANYON	5535			BELL CANYON	5535
CHERRY CANYON	6518			CHERRY CANYON	6518
BRUSHY CANYON	8066			BRUSHY CANYON	8066
BONE SPRING LIMESTONE	9379			BONE SPRING LIMESTONE	9379

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

1ST BONE SPRING 10519  
1ST BONE SPRING SHALE 10709  
2ND BONE SPRING 11128  
2ND BONE SPRING BASE 11561  
3RD BONE SPRING 12111

## 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 #488908 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Hobbs

Name (please print) AMANDA AVERYTitle REGULATORY ANALYST

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

Date 10/21/2019

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 \*\***