

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 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	
						7. Unit or CA Agreement Name and No.	
2. Name of Operator COG OPERATING LLC Contact: AMANDA AVERY E-Mail: aaavery@concho.com						8. Lease Name and Well No. TIN FOIL FEDERAL COM 604H	
3. Address 2208 W MAIN STREET ARTESIA, NM 88210				3a. Phone No. (include area code) Ph: 575-748-6940		9. API Well No. 30-025-46562	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface Sec 23 T25S R35E Mer NMP Lot M 400FSL 1310FWL 32.109688 N Lat, 103.342633 W Lon Sec 23 T25S R35E Mer NMP At top prod interval reported below Lot M 400FSL 1310FWL 32.109688 N Lat, 103.342633 W Lon Sec 14 T25S R35E Mer NMP At total depth Lot D 49FNL 1298FWL 32.137482 N Lat, 103.342666 W Lon						10. Field and Pool, or Exploratory WC-025 G-09 S253502D; WC	
						11. Sec., T., R., M., or Block and Survey or Area Sec 23 T25S R35E Mer NMP	
						12. County or Parish LEA	13. State NM
						17. Elevations (DF, KB, RT, GL)* 3179 GL	
14. Date Spudded 12/14/2019		15. Date T.D. Reached 01/14/2020		16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 06/09/2020			
18. Total Depth:		MD 22475 TVD 12236		19. Plug Back T.D.:		MD 22365 TVD 12236	
				20. Depth Bridge Plug Set:			
				MD 22365 TVD 12236			
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 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)

[illegible]

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	11763	11753						

25. Producing Intervals

25. Producing Intervals			26. Perforation Record			
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	12430	22340	12430 TO 22340		1044	OPEN
B)						
C)						
D)						



26. Perforation Record

25. Producing Intervals			26. Perforation Record			
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	12430	22340	12430 TO 22340		1044	OPEN
B)						
C)						
D)						



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

Depth Interval	Amount and Type of Material
12430 TO 22340	75000 GAL 7.5%; 19,830,925# SAND; 19,706,850 GAL FLUID

28. Production - Interval A

Date First Produced 06/16/2020	Test Date 06/16/2020	Hours Tested 24	Test Production 	Oil BBL 370.0	Gas MCF 202.0	Water BBL 1748.0	Oil Gravity Corr. API	Gas Gravity	Production Method GAS LIFT
Choke Size 20/64	Tbg. Press. Flwg. 2700 SI	Csg. Press. 2300.0	24 Hr. Rate 	Oil BBL 370	Gas MCF 202	Water BBL 1748	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 #521437 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.*)
STOLEN

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
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Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
RUSTLER	765			RUSTLER	765
TOP OF SALT	925			TOP OF SALT	925
BOTTOM OF SALT	4861			BOTTOM OF SALT	4861
LAMAR	5119			LAMAR	5119
BELL CANYON	5149			BELL CANYON	5149
CHERRY CANYON	6043			CHERRY CANYON	6043
BRUSHY CANYON	7469			BRUSHY CANYON	7467
BRUSHY CANYON A	8543			BRUSHY CANYON A	8543

32. Additional remarks (include plugging procedure):
 BONE SPRING LIMESTONE 8752
 1ST BONE SPRING 10123
 1ST BONE SPRING SHALE 10226
 2ND BONE SPRING 10673
 2nd Bone Spring Base 11217
 3rd Bone Spring 11781
 3rd Bone Spring W 12019
 Wolfcamp 12106

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 #521437 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs

Name(*please print*) AMANDA AVERY Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 07/09/2020

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.

Additional data for transaction #521437 that would not fit on the form

32. Additional remarks, continued

Wolfcamp Lith 12241