

Submit To Appropriate District Office Two Copies 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 and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-105 Revised August 1, 2011 1. WELL API NO. 30-025-41482 2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.
WELL COMPLETION OR RECOMPLETION REPORT AND LOG		
4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (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)		5. Lease Name or Unit Agreement Name R R Sims B 6. Well Number: 2 HOBBS OOD
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input checked="" type="checkbox"/> OTHER P & A		9. OGRID 305165 11. Pool name or Wildcat RECEIVED
8. Name of Operator Brammer Engineering, Inc.		10. Address of Operator 400 Texas Street, Suite 600 Shreveport, LA 71101
12. Location Surface: O BH:	Unit Ltr 4 Section 23S Township 37E Range Lot Feet from the 330 N/S Line S Feet from the 1330 E/W Line E County Lea	13. Date Spudded 4/9/2014 14. Date T.D. Reached 4/12/2014 15. Date Rig Released 4/16/2014 16. Date Completed (Ready to Produce) P & A - 5/21/2014 17. Elevations (DF and RKB, RT, GR, etc.) 3307' GR
18. Total Measured Depth of Well 1400'	19. Plug Back Measured Depth surface (P&A)	20. Was Directional Survey Made? Yes 21. Type Electric and Other Logs Run None
22. Producing Interval(s), of this completion - Top, Bottom, Name.		
23. CASING RECORD (Report all strings set in well)		
CASING SIZE 8-5/8"	WEIGHT LB/FT. 24#	DEPTH SET 1140'
HOLE SIZE 11"	CEMENTING RECORD 440 sxs Class H	AMOUNT PULLED none
24. LINER RECORD SIZE TOP BOTTOM SACKS CEMENT SCREEN		
25. TUBING RECORD SIZE DEPTH SET PACKER SET		
26. Perforation record (interval, size, and number)		
27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED		
28. PRODUCTION		
Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)	Well Status (Prod. or Shut-in)
Date of Test	Hours Tested	Choke Size
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate
Oil - Bbl.	Gas - MCF	Water - Bbl.
Gas - Oil Ratio	Oil Gravity - API - (Corr.)	29. Disposition of Gas (Sold, used for fuel, vented, etc.)
30. Test Witnessed By		31. List Attachments Certified survey sheet
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.		
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 <i>Adonya Dryden</i>	Printed Name Adonya Dryden	Title Co-Administrator, Regulatory
E-mail Address adonya.dryden@brammer.com	Date 5/22/14	Longitude NAD 1927 1983

JUN 09 2014

State Of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division

Form W-12
(1-1-71)
FOD1296

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report)		6. OGRID Number 4323
HOBBS OCD		7. API Number 30-025-41482
1. FIELD NAME Langlie Mattix 7 RVRs-Q-Grayburg	2. LEASE NAME RR Sims B	8. Well Number 002
3. OPERATOR Chevron USA Inc.		9. RRC Identification Number (Gas completions only)
Houston, TX 77252		10. County Lea
5. LOCATION (Section, Block, and Survey) Lot O, Sec.4, 23S Township, Range 37B		

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle x100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
165	165	0.50	0.87	1.44	1.44
429	264	0.60	1.05	2.76	4.20
618	189	0.30	0.52	0.99	5.19
967	349	0.30	0.52	1.83	7.02
1062	95	0.30	0.52	0.50	7.52
1133	71	0.60	1.05	0.74	8.26
1208	75	0.30	0.52	0.39	8.65

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☐ yes ☒ no
18. Accumulative total displacement of well bore at total depth of 1208 feet = 8.65 feet.
- *19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line 330 feet.
21. Minimum distance to lease line as prescribed by field rules feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? No

(If the answer to the above question is "yes," attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION I declare, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form. <div style="border-top: 1px solid black; margin-top: 20px;"> </div> <div style="border-top: 1px solid black; margin-top: 5px;"> John Halldorson / President / Operations </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Name of Person and Title (type or print) </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Eagle Rock Drilling, Inc. </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Name of Company </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Telephone: 432-682-3030 </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Area Code </div>	OPERATOR CERTIFICATION I declare I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form. <div style="border-top: 1px solid black; margin-top: 20px;"> Signature of Authorized Representative </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Name of Person and Title (type or print) </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Operator </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Telephone: </div> <div style="border-top: 1px solid black; margin-top: 5px;"> Area Code </div>
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