1. WELL APP NO.	Submit To Appropr	iate Dietric	Office				7 C N T		<i>.</i>									<u> </u>		
1.	Two Copies	iate Distric	Office	ì								A	a							
Detail 15 States Antens Not Serior 1220 South St. Francis Dr. 1220 South St. 1220 So		Į	Energy, Minerals and Natural Resources								Revised August 1, 2011									
COMPLETION REPORT (Fill in boses #1 invested #3 16 State and Fee wells only) Santa Fe, NM 87505 Santa Fe, NM		, 110003, 14	W1 00240	ĺ									1. WELL API NO.							
## 1220 South St. Francis Dr. ## 2015 8.5 Fr		esia, NM 8	8210	ļ	Oil Conservation Division of 5 20							204	30-025-40954							
Santa Fe, NM 87505 Santa F			On Conscivation Division K (1) 20							٦.	'2. Type of Lease									
Santa Free Note Santa		ı., Azicc, N	W 07410		1220 South St. Francis Dr.							-	STATE							
CAMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) Contacon State Unit												mer s	3. State On a	x Gas i	Lease No.			_		
CAMPLETION REPORT (#ill in boxes #1 through #97, #15 Due Rig Released and #32 antiver \$1.50 to Rig Released	WELL COMPLETION OR RECOMPLETION REPORT AND LOG																• .			
COMPLETION REPORT (Fill in boxes, #1 through #31 for State and Fee wells only)	4 Reason for filing:												5. Lease Name or Unit Agreement Name							
COMPLETION REPORT (Fill in boses #1 through #2) if or State and Fee wells only	· ·												3. Souse Frame of Clint righterment Frame							
13.3 attack this and the plat to the C144 closure report in accordance with 191517.i3.R NAMAC) 12.17 17.9 pct Completion:		ON REP	ORT (Fill in	n boxes #	l throug	gh #31 f	for State and Fe	e wells	s only)	ı		_	6. Well Numl							
1211 1212 1213 1214 1215		1 T T T T T T T T T T T T T T T T T T T	TA CYTA COA	. IOD - / IC: 11			1 110 1115 5		ъ.		1 400 1	. 1								
Type of Completion:												or			12	2H				
SNB WELL WORKOVER DEPENDIG PULIGRACK DIFFERENT RESERVOIR OTHER			to the C-14	+ closure	report	ii accoi	dance with 15.	13.17.1	13.IX IX	WIAC.			 -							
10. Address of Operator												OIR	IR OTHER							
10. Auffers of Operator																				
11. Pool name or Wildcat	COG Opera	ating LL	.C												229	137				
Artesia, NM 8210 Section Township Range Lot Feet from the NS Line Feet from the E/W Line Count								_				一	11. Pool name	or Wi				-		
Artesia, NM 88210			et									-	Wildo	at G-	08 S213	304D: E	Bone	Spring		
22. Location												٠				· - , -		-18		
Surface: 2					Township Range					П	Feet from t	he	N/S Line Fee		eet from the E/		W Line County			
3. Date Spudded 14. Date T.D. Reached 15. Date Rig Released 16. Date Completed (Ready of Produce) 17. Elevations (OF and Re 7/24/14 8/18/14 8/18/14 8/21/14 2/2/0/15 17. Elevations (OF and Re 7/24/14 8/18/14 8/21/14 8/21/14 2/2/0/15 17. Elevations (OF and Re 7/24/14 8/18/14 8/21/14 8/21/14 2/2/0/15 17. Elevations (OF and Re 7/24/14 8/18/14 8/21/14 8/21/14 2/2/0/15 17. Elevations (OF and Re 7/24/14 8/18/14 8/21/14 2/2/0/15 17. Elevations (OF and Re 7/24/14 8/18/14 8/21/14 2/2/0/15 17. Elevations (OF and Re 7/24/14 8/18/14 18/0 1/2/0/15 18/30 1/2/0				-		г			-	—		-								
3. Date Spudded			4				<u> </u>	12					North			East		Lea		
18. Total Measured Depth of Well 19. Plug Back Measured Depth 18390' 20. Was Directional Survey Made? 21. Type Electric and Other Log 18503' 18390' Yes None 18390' Yes None 18390' Yes None 18390' Yes None None 18390' Yes None	ВН:	O	4		21S		33E			;	339		South	1987		East		Lea		
18. Total Measured Depth of Well 19. Plug Back Measured Depth 18.503' 18.390' 20. Was Directional Survey Made? 21. Type Electric and Other Log 18503' 18390' Yes None	3. Date Spudded	14. Da	ate T.D. Rea	ched	15. D	ate Rig	Released			16. E	Date Compl	eted	(Ready to Produce)		17	. Elevation	ıs (DF	and RKB.		
18. Total Measured Depth of Well 19. Plug Back Measured Depth 18390' 20. Was Directional Survey Made? 21. Type Electric and Other Log 18390' Yes None None 18390' Yes None Yes None None 18390' Yes None Yes None None 18390' Yes None None 18390' Yes None None None 18390' Yes None		1				C					,		-	,				801' GR		
18390' Yes		ed Depth		_																
CASING RECORD (Report all strings set in well) CASING RECORD (Report all strings set in well) CASING SIZE						·		•					-							
CASING SIZE WEIGHT LB:/FT. DEPTH SET HOLE SIZE CEMENTING RECORD AMOUNT PULL	22 Producing Int	etion - T																		
CASING RECORD (Report all strings set in well)						,							Į							
CASING SIZE WEIGHT LB/FT. DEPTH SET HOLE SIZE CEMENTING RECORD AMOUNT PULL			o pring				INC DEC	'AD	n (p	ono	et all ate	.i.n.a	ra cot in w		_					
13 3/8" 54.5# 1800' 17 1/2" 1325 sx 0 9 5/8" 40# 5495' 12 1/4" 3050 sx 0 5 1/2" 17# 18482' 8 3/4" 3500 sx 0 10		75 1	WEIGH	IT I D /D				UN	D (N			mg								
9 5/8" 40# 5495' 12 1/4" 3050 sx 0					1.			-								AN				
STOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET													4							
LINER RECORD SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET 2 7/8" 10878' 10862' 26. Perforation record (interval, size, and number) 11640-18314' (1260) 11840-18314' (1260) 11840-18370' (60) 118415-18425' (60) PRODUCTION PRODUCTION PROPER PROPE PRO	9 5/8" 40#_			10#	5495'				 											
TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET 2 7/8" 10878' 10878' 10862'	5 1/2"		1	17#	18482'				8 3/4"				3500 sx				0			
TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET 2 7/8" 10878' 10878' 10862'							_													
TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET 2 7/8" 10878' 10862'	24.					LIN	ER RECORD					25.	7	rubin	IG RECO	ORD				
27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 11640-18314' (1260) 18360-18370' (60) 18415-18425' (60) Date First Production 2/22/15 Production Method (Flowing, gas lift, pumping - Size and type pump) Producing Producing Producing Producing Producing Producing Producing Producing Prosure 1/28/15 Prow Tubing Casing Pressure Calculated 24- Oil - Bbl. Gas - MCF Hour Rate 478 S85 2068 Press. 1430# Hour Rate 478 S85 2068 Surveys 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 temporary pit. 34. List Attachments Surveys 35. If an on-site burial was used at the well, report the exact location of the temporary pit. 36. List Attachments Surveys 37. If a temporary pit was used at the well, report the exact location of the temporary pit. 38. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Variation Value Variation Value Val	SIZE	TOP		BOT	TOM		SACKS CEM	IENT	SCR	EEN		SIZ	E	DE	PTH SET	F	ACKI	ER SET		
DEPTH INTERVAL 11640-18314' (1260) 18360-18370' (60) 18415-18425' (60) 28. PRODUCTION Date First Production 2/22/15 Date of Test 2/28/15 24 25/64' Test Period 478 S85 2068 Production Gas (Sold, used for fuel, venied, etc.) Plaining Plaining 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 form is true and complete to the best of my knowledge and belief Prince of Test of Test Production Production Method (Flowing, gas lift, pumping - Size and type pump) Producting Production Method (Flowing, gas lift, pumping - Size and type pump) Producting Producting Production Method (Flowing, gas lift, pumping - Size and type pump) Producting Producting Production Produ													2 7/8"		10878	,		10862'		
DEPTH INTERVAL 11640-18314' (1260) 18360-18370' (60) 18415-18425' (60) 28. PRODUCTION Date First Production 2/22/15 Date of Test 2/28/15 24 25/64' Test Period 478 S85 2068 Production Gas (Sold, used for fuel, venied, etc.) Plaining Plaining 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 form is true and complete to the best of my knowledge and belief Prince of Test of Test Production Production Method (Flowing, gas lift, pumping - Size and type pump) Producting Production Method (Flowing, gas lift, pumping - Size and type pump) Producting Producting Production Method (Flowing, gas lift, pumping - Size and type pump) Producting Producting Production Produ																				
DEPTH INTERVAL 11640-18314' (1260) 18360-18370' (60) 18415-18425' (60) Production Method (Flowing, gas lift, pumping - Size and type pump) 2/22/15 Date of Test 2/28/15 Date Shut-in) Production Producting Production Producting Producting Producting Producting Production Producting Producting Production Producting Production Producting Production Producting Production Production Production Producting Production Pro	26. Perforation	record (in	nterval, size,	and num	nber)		·		27.	ACII	D. SHOT.	FRA	ACTURE, CE	EMEN	T. SOUE	EZE. ET	TC.			
11640-18314' (1260) 18360-18370' (60) 18415-18425' (60) PRODUCTION Date First Production 2/22/15 Date of Test 2/28/15 Casing Pressure Calculated 24-Hour Rate Hour Rate Hour Rate 478 Disposition of Gas (Sold, used for fuel, vented, etc.) Flaring 1. List Attachments Surveys 3. If an on-site burial was used at the well, attach a plat with the location of the temporary pit. Latitude Latitude Longitude NAD 1927 Latitude Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: Latitude Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: Latitude Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: Latitude Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: Latitude Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: Latitude Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1:		,			ĺ															
Rest			11640-1													6.602# sar				
PRODUCTION Date First Production 2/22/15 Date of Test 2/28/15 D					` ,															
PRODUCTION Date First Production 2/22/15 Production Method (Flowing. gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) Producing Date of Test Hours Tested Choke Size Prod For Oil - Bbt Gas - MCF Water - Bbl. Gas - Oil Ratio 2/28/15 24 25/64" Test Period 478 585 2068 Flow Tubing Casing Pressure Calculated 24- Oil - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API - (Corr.) Press. 1430# Hour Rate 478 585 2068 19. Disposition of Gas (Sold, used for fuel. vented, etc.) Flaring Tyler Deans 10. List Attachments Surveys 12. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 13. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1:		18425	` ,						-											
Date First Production 2/22/15 Production Method (Flowing. gas lift, pumping - Size and type pump) Flowing Date of Test 2/28/15 Da				100	(00)				-											
Production 2/22/15 Production Method (Flowing. gas lift, pumping - Size and type pump) Producing								DD		T CHIEF	TON		L							
Producing Prod												-	1							
Date of Test Hours Tested Choke Size 2/28/15 24 25/64" Test Period 478 585 2068				Producti	on Meth	od (Flo			ıg - Siz	e and	type pump,)	Well Statu	s (<i>Prod</i>		•				
2/28/15 24 25/64" Test Period 478 585 2068 Flow Tubing Casing Pressure Calculated 24- Oil - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API - (Corr.) Press. 1430# Hour Rate 478 585 2068 29. Disposition of Gas (Sold, used for fuel, vented, etc.) Flaring 30. Test Witnessed By Tyler Deans 81. List Attachments Surveys 82. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 83. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1:							,	ng												
Calculated 24- Oil - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API - (Corr.) Peress. 1430# Hour Rate 478 585 2068 29. Disposition of Gas (Sold, used for fuel, vented, etc.) Flaring 30. Test Witnessed By 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 Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: Fermail Address: sdavis@concho.com		Hours					1		Oil -			Gas		Wa			Gas - C	Dil Ratio		
Press. 1430# Hour Rate 478 585 2068 29. Disposition of Gas (Sold, used for fuel, vented, etc.) Flaring 30. Test Witnessed By 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 Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15		_							1						_					
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Flaring 30. Test Witnessed By 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 Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Signature Signature Stormi Davis Title Regulatory Analyst Date: 3/3/15		Casin	g Pressure			4-				Gas - I		, V			Oil Grav	vity - API	- (Cor	r.)		
Flaring Tyler Deans 11. List Attachments Surveys 12. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 13. If an on-site burial was used at the well, report the exact location of the on-site burial: 14. Latitude Longitude NAD 1927 15. Latitude Longitude NAD 1927 16. Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15 16. E-mail Address: sdavis@concho.com	Press. 1430#						<u> </u>	3			585		2068		<u> </u>					
Surveys 12. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 13. If an on-site burial was used at the well, report the exact location of the on-site burial: 14. Latitude Longitude NAD 1927 15. In the location of the information shown on both sides of this form is true and complete to the best of my knowledge and belief 16. Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15 16. Email Address: sdavis@concho.com		f Gas (Sol	d, used for fi	uel, vente	ed, etc.)									30. T						
Surveys 2. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 3. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15	Flaring													1		I yler D	eans			
Surveys 2. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 3. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15	1. List Attachme	ents																		
2. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. 3. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15																				
Latitude Longitude NAD 1927		y pit was i	ised at the w	ell, attac	h a plat	with the	e location of the	e temp	orary r	oit.					_					
Latitude Longitude NAD 1927 Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/15 Fermail Address: sdayis@concho.com					-															
Hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Signature Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1: F-mail Address: sdavis@concho.com	55. If an on-site b	ouriai was	used at the v	мен, геро	ori ine e	xact loc	ation of the on-	-site bi	лпан:											
Printed Name: Stormi Davis Title Regulatory Analyst Date: 3/3/1:																				
Signature Stormi Davis Title Regulatory Analyst Date: 3/3/1:	I hereby certif	fy that th	he infqrma	ution sh	iown o			s forn	n is tr	ие аг	nd compl	ete i	to the best o	of my	knowlea	tge and t	beliej	Ľ		
F-mail Address: sdayis@concho.com		0.	/	_					ъ.			_	.			~		2/2/15		
F-mail Address: sdavis@concho.com	Signature –	to	5 /	cied	,]	name: St	ormi	Davis	S	Titl	e F	kegulatory .	Analy	st	D	ate:	3/3/15		
E-mail Address: sdavis@concno.com		_			•										12	_				
	<u>ت-maii Addre</u>	<u>ss: sdav</u>	ris w conch	10.com											KE	<u> </u>				
MAR 1 0 2015														,	TUM.	AR 1	n s	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

	T. Ojo Alamo T. Kirtland T. Fruitland T. Pictured Cliffs T. Cliff House	T. Penn A" T. Penn. "B" T. Penn. "C" T. Penn. "D" T. Leadville
	T. Kirtland T. Fruitland T. Pictured Cliffs	T. Penn. "C" T. Penn. "D"
	T. Pictured Cliffs	T. Penn. "D"
	T. Cliff House	T Leadville
		1. Lead ville
	T. Menefee	T. Madison
1770'	T. Point Lookout	T. Elbert
4064'	T. Mancos	T. McCracken
5601'	T. Gallup	T. Ignacio Otzte
6700'	Base Greenhorn	T. Granite
8853'	T. Dakota	
9840'	T. Morrison	
10390'	T.Todilto	
11278'	T. Entrada	
	T. Wingate	
	T. Chinle	
	T. Permian	
	4064' 5601' 6700' 8853' 9840' 10390'	1770' T. Point Lookout 4064' T. Mancos 5601' T. Gallup 6700' Base Greenhorn 8853' T. Dakota 9840' T. Morrison 10390' T.Todilto 11278' T. Entrada T. Wingate T. Chinle

			OIL OR GAS SANDS OR ZONE
No. 1, from	to	No. 3, from	to
No. 2, from	to	No. 4, from	to
	IMPORTANT \	WATER SANDS	
Include data on rate of water	er inflow and elevation to which wate	r rose in hole.	
No. 1, from	to	feet	•••••
No. 2, from	to	feet	
No. 3, from	to	feet	•••••
Ι	LITHOLOGY RECORD	Attach additional sheet if	necessary)

Thickness

Thickness

From	То	Thickness In Feet	Lithology	From	То	Thickness In Feet	Lithology
	i	1					