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|---|-------------------------------|---|------------------------------|------------|---------------------------------------|---|--------------------------------|--------------------------------------|------------|----------------|-------------------------------|-------------|-------------------------------|--|--|--|--|
| Submit to Appropriate District Office Five Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | NM OIL CONSERVATION State of New Mexico Energy, Minerals and Natural Resources JUL 27 2015 OIL CONSERVATION DIVISION RECEIVED 1220 South St. Francis Dr. Santa Fe, NM 87505 | | | | Form C-105 Revised August 1, 2011 | | | | | | | | | | | |
| 1. WELL API NO. 30-025-41861 | | | | | | | | | | | | | | | | | |
| 2. Type Of Lease <input checked="" type="checkbox"/> STATE <input 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 Perla Verde 31 State | | | | | | | | | | | |
| | | | | | | 6. Well Number 002H | | | | | | | | | | | |
| 9. Type of Completion <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER | | | | | | | | | | | | | | | | | |
| 8. Name of Operator XTO Energy, Inc | | | | | | 9. OGRID Number 005380 | | | | | | | | | | | |
| 10. Address of Operator 500 W. Illinois, Ste 100 Midland, TX 79701 | | | | | | 11. Pool name or Wildcat 3rd Bond Sprind Sand | | | | | | | | | | | |
| 12. Location | Unit Letter | Section | Township | Range | Lot | Feet from the | N/S Line | Feet from the | E/W Line | County | | | | | | | |
| Surface: | O | 31 | 19S | 35E | | 230 | S | 2060 | E | Lea | | | | | | | |
| BH: | B | 31 | 19S | 35E | | 280 21' | N | 1865 | E | Lea | | | | | | | |
| 13. Date Spudded | 14. Date T.D. Reached | | 15. Date Rig Released | | 16. Date Completed (Ready to Produce) | | | 17. Elevations (DF & RKB, RT, GR) | | | | | | | | | |
| 10/11/2014 | 11/14/2014 | | 11/19/2014 | | 12/12/2014 | | | 3702'GR | | | | | | | | | |
| 18. Total Measured Depth of Well | | | 19. Plug Back Measured Depth | | | 20. Was Directional Survey Made | | 21. Type Electric and Other Logs Run | | | | | | | | | |
| 15660 | | | 15571 | | | Yes | | RCBL, GR, CCL | | | | | | | | | |
| 22. Producing Interval(s), of this completion - Top, Bottom, Name 11250 - 15529 Bone Spring | | | | | | | | | | | | | | | | | |
| 23. CASING RECORD (Report all strings set in well) | | | | | | | | | | | | | | | | | |
| CASING SIZE | | WEIGHT LB./FT. | | DEPTH SET | | HOLE SIZE | | CEMENTING RECORD | | AMOUNT PULLED | | | | | | | |
| 13 3/8 | | 54.5# | | 1890 | | 17 1/2 | | 1800 sxs | | | | | | | | | |
| 9 5/8 | | 40# | | 3958 | | 12 1/4 | | 1145 sxs | | | | | | | | | |
| 5 1/2 | | 17# | | 15660 | | 8 3/4 | | 2060 sxs | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| 24. LINER RECORD | | | | | | | | | | | | | | | | | |
| SIZE | TOP | BOTTOM | SACKS CEMENT | | SCREEN | | 25. TUBING RECORD | | | | | | | | | | |
| | | | | | | | SIZE | | DEPTH SET | PACKER SET | | | | | | | |
| | | | | | | | 2 7/8 | | 10517 | 10496 | | | | | | | |
| 26. Perforation record (interval, size, and number) no perts, sliding sleeves 11,250 - 15,529 | | | | | | | | | | | | | | | | | |
| 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>DEPTH INTERVAL</td> <td>AMOUNT AND KIND MATERIAL USED</td> </tr> <tr> <td>11250-15529</td> <td>frac, see frac report on file</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table> | | | | | | | | | | DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED | 11250-15529 | frac, see frac report on file | | | | |
| DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED | | | | | | | | | | | | | | | | |
| 11250-15529 | frac, see frac report on file | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| 28. PRODUCTION | | | | | | | | | | | | | | | | | |
| Date First Production | | Production Method (Flowing, gas lift, pumping - Size and type pump) | | | | | Well Status (Prod. or Shut-in) | | | | | | | | | | |
| 12/21/2014 | | flowing | | | | | producing | | | | | | | | | | |
| Date of Test | Hours Tested | Choke Size | Prod'n For Test Period | Oil - Bbl. | Gas - MCF | Water - Bbl. | Gas - Oil Ratio | | | | | | | | | | |
| 01/07/2015 | 24 | | | 589 | 300 | 571 | 509.34 | | | | | | | | | | |
| Flow Tubing Press. | Casing Pressure | Calculated 24-Hour Rate | Oil - Bbl. | Gas - MCF | Water - Bbl. | Oil Gravity - API -(Corr.) | | | | | | | | | | | |
| 300 | | | 589 | 300 | 571 | 40 | | | | | | | | | | | |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.) | | | | | | | 30. Test Witnessed By | | | | | | | | | | |
| Sold | | | | | | | | | | | | | | | | | |
| 31. List Attachments C102,C103,C104, wellbore diagram, deviation report, log, and directional report | | | | | | | | | | | | | | | | | |
| 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 1983 | | | | | | | | | | | | | | | | | |
| 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 | | | Printed Name | | Title | | Reg. Analyst | | Date | | | | | | | | |
| Tessa Fitzhugh | | | Tessa Fitzhugh | | | | | | 07/13/2015 | | | | | | | | |
| E-mail address | | | | | | | | | | | | | | | | | |
| tessa_fitzhugh@xtoenergy.com | | | | | | | | | | | | | | | | | |

AUG 03 2015