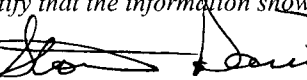


Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>		<b>Form C-105</b> Revised August 1, 2011	
		1. WELL API NO.		30-025-42036	
		2. Type of Lease		<input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN	
		3. State Oil & Gas Lease No.			
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>					
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (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 Stratosphere 36 State Com  6. Well Number: <div style="text-align: right;">5H      <b>HOBBS OGD</b></div>		
7. 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			<b>SEP 25 2015</b>		
8. Name of Operator COG Operating LLC			9. OGRID 229137		
10. Address of Operator 2208 W. Main Street Artesia, NM 88210			11. Pool name or Wildcat Berry; Bone Spring, North		
12. Location	Unit Ltr	Section	Township	Range	Lot
Surface:	C	36	20S	34E	
BH:	N	36	20S	34E	
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released		16. Date Completed (Ready to Produce)	
5/27/15	6/17/15	6/19/15		9/12/15	
18. Total Measured Depth of Well		19. Plug Back Measured Depth		20. Was Directional Survey Made?	
15929'		15865'		Yes	
				21. Type Electric and Other Logs Run	
				None	
22. Producing Interval(s), of this completion - Top, Bottom, Name					
11432-15825' Bone Spring					
<b>23. CASING RECORD (Report all strings set in well)</b>					
CASING SIZE	WEIGHT LB./FT.		DEPTH SET		HOLE SIZE
13 3/8"	54.5#		1761'		17 1/2"
9 5/8"	36#		5762'		12 1/4"
5 1/2"	17#		15918'		8 3/4"
24. LINER RECORD			25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE
					2 7/8"
			DEPTH SET		
			10749'		
			PACKER SET		
			10731'		
26. Perforation record (interval, size, and number)			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.		
11432-15765' (792) 15815-15825' (60)			DEPTH INTERVAL		
			11432-15765'		
			AMOUNT AND KIND MATERIAL USED		
			Acidz w/70686 gal 7 1/2%; Frac w/6834233# sand & 7046004 gal fluid		
<b>28. PRODUCTION</b>					
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. or Shut-in)	
9/16/15		Flowing		Producing	
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF
9/20/15	24	32/64"		513	590
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.
1300#			513	590	2075
29. Disposition of Gas (Sold, used for fuel, vented, etc.)					30. Test Witnessed By
Flared					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 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	
		Stormi Davis		Regulatory Analyst	
E-mail Address: sdavis@concho.com				Date: 9/22/15	

# 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

Southeastern New Mexico			Northwestern New Mexico	
T. Anhy	T. Canyon		T. Ojo Alamo	T. Penn A"
T. Salt 1826'	T. Strawn		T. Kirtland	T. Penn. "B"
B. Salt 3591'	T. Atoka		T. Fruitland	T. Penn. "C"
T. Yates	T. Miss		T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian		T. Cliff House	T. Leadville
T. Queen	T. Silurian		T. Menefee	T. Madison
T. Grayburg	T. Montoya		T. Point Lookout	T. Elbert
T. San Andres	T. Simpson		T. Mancos	T. McCracken
T. Glorieta	T. Rustler 1741'		T. Gallup	T. Ignacio Otzte
T. Paddock	T. Delaware 5848'		Base Greenhorn	T. Granite
T. Blinebry	T. Cherry Canyon 5866'		T. Dakota	
T. Tubb	T. Brushy Canyon 6802'		T. Morrison	
T. Drinkard	T. Bone Spring Lm 8562'		T. Todilto	
T. Abo	T. 1 <sup>st</sup> Bone Spring 9720'		T. Entrada	
T. Wolfcamp	T. 2 <sup>nd</sup> Bone Spring 10459'		T. Wingate	
T. Penn	T. 3 <sup>rd</sup> Bone Spring 11341'		T. Chinle	
T. Cisco (Bough C)	T.		T. Permian	

## OIL OR GAS SANDS OR ZONES

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 inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology