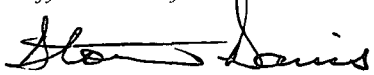


Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and 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. <div style="text-align: right;">30-025-42377</div>								
		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 <div style="text-align: right;">Iggles State Com</div>						
				6. Well Number: <span style="float: right;"><b>HOBBS OCL</b></span>  <div style="text-align: right;">1H</div> <div style="text-align: right;"><b>SEP 25 2015</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										
8. Name of Operator <div style="text-align: right;">COG Operating LLC</div>				9. OGRID <div style="text-align: right;">229137    <b>RECEIVED</b></div>						
10. Address of Operator 2208 W. Main Street Artesia, NM 88210				11. Pool name or Wildcat <div style="text-align: center;">Vacuum; Bone Spring, West</div>						
12. Location	Unit Ltr	Section	Township	Range	Lot	90	N/S Line	Feet from the	E/W Line	County
Surface:	M	21	18S	34E		330	South	350	West	Lea
BH:	L	16	18S	34E		2300	South	390	West	Lea
13. Date Spudded 6/19/15	14. Date T.D. Reached 7/27/15	15. Date Rig Released 7/30/15		16. Date Completed (Ready to Produce) 9/9/15		17. Elevations (DF and RKB, RT, GR, etc.) 4040' GR				
18. Total Measured Depth of Well 16954'		19. Plug Back Measured Depth 16860'		20. Was Directional Survey Made? Yes		21. Type Electric and Other Logs Run None				
22. Producing Interval(s), of this completion - Top, Bottom, Name 10107-16835' Bone Spring										
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13 3/8"		54.5#		1894'		17 1/2"		1270 sx		0
9 5/8"		36#		3410'		12 1/4"		925 sx		0
5 1/2"		17#		16928'		8 3/4"		3030 sx		0
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD					
					SIZE	DEPTH SET	PACKER SET			
					2 7/8"	9268'	9259'			
26. Perforation record (interval, size, and number)  10107-16835' (1270)					27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.					
					DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED			
					10107-16835'		Acdz w/613272 gal 7 1/2%; Frac w/10,773,394# sand & 11,722,464 gal fluid			
<b>28. PRODUCTION</b>										
Date First Production 9/17/15		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing				
Date of Test 9/22/15	Hours Tested 24	Choke Size 34/64"	Prod'n For Test Period	Oil - Bbl 680	Gas - MCF 430	Water - Bbl. 2404	Gas - Oil Ratio			
Flow Tubing Press. 425#	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl. 680	Gas - MCF 430	Water - Bbl. 2404	Oil Gravity - API - (Corr.)				
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold						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 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: Stormi Davis		Title Regulatory Analyst			Date: 9/23/15			
E-mail Address: sdavis@concho.com										

**SEP 28 2015**





## C

Southeastern New Mexico	Northwestern New Mexico
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OIL OR GAS

## IMPORTANT WATER SANDS

## tion to which water rose in hole

No. 1 from \_\_\_\_\_ to \_\_\_\_\_ feet

No. 2 from \_\_\_\_\_ to \_\_\_\_\_ feet

LITHOLOGICAL RECORD

					Thickness	
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[illegible]