

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

HOBBS OCD

DEC 30 2016

RECEIVED

State of New Mexico
Energy, Minerals & Natural Resources

Oil Conservation Division

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 229137
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-43169	⁵ Pool Name Lusk; Bone Spring, North	⁶ Pool Code 41450
⁷ Property Code 308225	⁸ Property Name Spruce Goose Federal Com	⁹ Well Number 3H

II. ¹⁰ Surface Location

Ul or lot no. 2	Section 7	Township 19S	Range 32E	Lot Idn 2	Feet from the 1980	North/South Line North	Feet from the 215' 10"	East/West line West	County Lea
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¹¹ Bottom Hole Location

Ul or lot no. H	Section 7	Township 19S	Range 32E	Lot Idn	Feet from the 2017	North/South Line North	Feet from the 61	East/West line East	County Lea
¹² Lse Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date 11/29/16	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
	Alpha Crude Connector Pipeline	O
36785	DCP Midstream, LP 10 Desta Dr - Suite 2500 Midland, TX 79705-4528	G

IV. Well Completion Data

²¹ Spud Date 7/24/16	²² Ready Date 11/15/16	²³ TD 14000'	²⁴ PBTD 13976'	²⁵ Perforations 9306-13925'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	924'	730		
12 1/4"	9 5/8"	3113'	930		
8 3/4"	5 1/2"	13995'	1970		
	2 7/8"	8764'			

V. Well Test Data

³¹ Date New Oil 11/21/16	³² Gas Delivery Date 11/29/16	³³ Test Date 11/21/16	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 350#	³⁶ Csg. Pressure 13#
³⁷ Choke Size	³⁸ Oil 41	³⁹ Water 1770	⁴⁰ Gas 86		⁴¹ Test Method Pumping

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:
Stormi Davis

Title:
Regulatory Analyst

E-mail Address:
sdavis@concho.com

Date:
12/27/16

Phone:
575-748-6946

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

01/06/17

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM104685
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: STORMI DAVIS E-Mail: sdavis@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 2208 WEST MAIN ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946	8. Well Name and No. SPRUCE GOOSE FEDERAL COM 3H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 7 T19S R32E Mer NMP SWNW 1980FNL 215FWL 210		9. API Well No. 30-025-43169
		10. Field and Pool or Exploratory Area LUSK; BONE SPRING, NORTH
		11. County or Parish, State LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

9/7/16 Load & test annulus to 1500#. Ran CBL. TOC @ 194'.

10/10/16 to 10/17/16 Perf 9306-13925' (1116). Acdz w/94888 gal 7 1/2%; frac w/6997942# sand & 6406921 gal fluid.

11/7/16 to 11/12/16 Drilled out CFP's. Circ clean.

11/13/16 to 11/14/16 Set 2 7/8" 6.5# L-80 tbg @ 8764' & PWOP.

11/15/16 Began flowing back & testing.

11/21/16 Date of first production.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #362014 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs**

Name (Printed/Typed) STORMI DAVIS

Title PREPARER

Signature (Electronic Submission)

Date 12/27/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other
b. Type of Completion ☒ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff. Resvr.
Other _____

2. Name of Operator COG OPERATING LLC **Contact:** STORMI DAVIS
E-Mail: sdavis@concho.com

3. Address 2208 WEST MAIN
ARTESIA, NM 88210 **3a. Phone No. (include area code)**
Ph: 575-748-6946

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
At surface Sec 7 T19S R32E Mer NMP
SWNW 1980FNL 215FWL
At top prod interval reported below 210
Sec 7 T19S R32E Mer NMP
At total depth SENE 2017FNL 61FEL

5. Lease Serial No. NMNM104685

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No. SPRUCE GOOSE FEDERAL COM 3H

9. API Well No. 30-025-43169

10. Field and Pool, or Exploratory LUSK; BONE SPRING, NORTH

11. Sec., T., R., M., or Block and Survey or Area Sec 7 T19S R32E Mer NMP

12. County or Parish LEA **13. State** NM

14. Date Spudded 07/24/2016 **15. Date T.D. Reached** 08/08/2016 **16. Date Completed**
☐ D & A ☒ Ready to Prod. 11/15/2016

17. Elevations (DF, KB, RT, GL)* 3624 GL

18. Total Depth: MD 14000
TVD 9244 **19. Plug Back T.D.:** MD 13976
TVD 9244 **20. Depth Bridge Plug Set:** MD
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE

22. Was well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit analysis)
Directional Survey? ☐ No ☒ Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	54.5	0	924		730		0	
12.250	9.625 J55	40.0	0	3113		930		0	
8.750	5.500 P110	17.0	0	13995		1970		194	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	8764							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9306	13925	9306 TO 13925	0.430	1116	OPEN
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9306 TO 13925	SEE ATTACHED

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
11/21/2016	11/21/2016	24	→	41.0	86.0	1770.0			ELECTRIC PUMP SUB-SURFACE
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	350	13.0	→	41	86	1770		POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #362018 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
BRUSHY CANYON	5339	6829		RUSTLER	930
BONE SPRING LM	6830	8074		TOS	1001
1ST BONE SPRING	8075	8970		BRUSHY CANYON	5339
2ND BONE SPRING	8971	9255		BONE SPRING LM	6830
				1ST BONE SPRING	8075
				2ND BONE SPRING	8971

32. Additional remarks (include plugging procedure):
Surveys & perms/stimulation are attached.

33. Circle enclosed attachments:

- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.) | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis | 7. Other: | |

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #362018 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs**

Name (please print) STORMI DAVIS Title PREPARER

Signature (Electronic Submission) Date 12/27/2016

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