

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

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit one copy to appropriate District Office

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address COG Production LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 217955
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-44630	⁵ Pool Name WC-025 G-06 S253201M; UPPER BONE SPR	⁶ Pool Code 97784
⁷ Property Code 314193	⁸ Property Name Eider Federal	⁹ Well Number 102H

II. ¹⁰ Surface Location

Ul or lot no. M	Section 35	Township 24S	Range 32E	Lot Idn	Feet from the 240	North/South Line South	Feet from the 1080	East/West line West	County Lea
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¹¹ Bottom Hole Location

Ul or lot no. L	Section 26	Township 24S	Range 32E	Lot Idn	Feet from the 2410	North/South Line South	Feet from the 986	East/West line West	County Lea
¹² Lse Code P	¹³ Producing Method Code F	¹⁴ Gas Connection Date 2/2/19	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
	ACC	O
298751	Lucid	G

IV. Well Completion Data

²¹ Spud Date 7/12/18	²² Ready Date 2/2/19	²³ TD 16466' <i>2239</i>	²⁴ PBDT 19370'	²⁵ Perforations 9407-16400'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	994'	800		
12 1/4"	9 5/8"	4831'	1400		
8 3/4"	5 1/2"	16455'	2500		
	2 7/8"	8737'			

V. Well Test Data

³¹ Date New Oil 2/2/19	³² Gas Delivery Date 2/2/19	³³ Test Date 2/2/19	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 975#	³⁶ Csg. Pressure 650#
³⁷ Choke Size 28/64"	³⁸ Oil 197	³⁹ Water 2564	⁴⁰ Gas 826		⁴¹ Test Method Flowing

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:

Amanda Avery

Printed name:
Amanda Avery

Title:
Regulatory Analyst

E-mail Address:
aavery@concho.com

Date:
02/19/19

Phone:
575-748-6962

Approved by:

Karen Sharp

Title:

Staff Mgr

Approval Date:

2-28-19

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM 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		8. Well Name and No. EIDER FEDERAL 102H
2. Name of Operator COG PRODUCTION LLC Contact: AMANDA AVERY E-Mail: aavery@concho.com		9. API Well No. 30-025-44630
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6940	10. Field and Pool or Exploratory Area WILDCAT; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T24S R32E Mer NMP SWSW 240FSL 1080FWL 32.167475 N Lat, 103.650496 W Lon		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 checked="" 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 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 Hydraulic Fracture
	<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.

09/22/18 Test annulus to 1500# Set CBP @ 16,387' and test csg to 8,503#. Good test.

10/25/18 - 11/10/18 Perf 9,367-16,362' (1200). Acdz w/61,152 gal 7 1/2%; frac w/14,424,265# sand & 11,947,530 gal fluid.

11/18/18 to 11/19/18 Drilled out CFP's. Clean down to PBTD @ 16,370'.

11/21/18 - 11/27/18 Set 2 7/8" 6.5# L-80 tbg @ 8,737' packer @ 8,727'. Installed gas lift system.

2/1/19 Began flowing back & testing.

2/2/19 Date of first production

14. I hereby certify that the foregoing is true and correct. Electronic Submission #455866 verified by the BLM Well Information System For COG PRODUCTION LLC, sent to the Hobbs	
Name (Printed/Typed) AMANDA AVERY	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 02/25/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____
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 knowing States any false, fictitious or fraudulent statements or representations as to any matter within its jurisd

(Instructions on page 2)

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

SUBMITTED **

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM120907

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

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

2. Name of Operator
COG PRODUCTION LLC
Contact: AMANDA AVERY
E-Mail: aavery@concho.com

8. Lease Name and Well No.
EIDER FEDERAL 102H

3. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3a. Phone No. (include area code)
Ph: 575-748-6940

9. API Well No.
30-025-44630

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
Sec 35 T24S R32E Mer NMP
At surface SWSW Lot M 240FNL 1080FWL 32.167475 N Lat, 103.650496 W Lon
Sec 35 T24S R32E Mer NMP
At top prod interval reported below SWSW Lot M 240FNL 1080FWL 32.167475 N Lat, 103.650496 W Lon
Sec 26 T24S R32E Mer NMP
At total depth NWSW Lot L 2410FSL 986FWL 32.187977 N Lat, 103.650798 W Lon

10. Field and Pool, or Exploratory
WILDCAT; BONE SPRING

11. Sec., T., R., M., or Block and Survey
or Area Sec 35 T24S R32E Mer NMP

12. County or Parish
LEA
13. State
NM

14. Date Spudded
07/12/2018

15. Date T.D. Reached
07/30/2018

16. Date Completed
☐ D & A ☒ Ready to Prod.
02/02/2019

17. Elevations (DF, KB, RT, GL)*
3522 GL

18. Total Depth: MD 16466
TVD 9228

19. Plug Back T.D.: MD 16370
TVD 9228

20. Depth Bridge Plug Set: MD 16387
TVD 9228

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

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	994		800		0	
12.750	9.625 L80	40.0	0	4831		1400		0	
8.750	5.500 P110	17.0	0	16455		2500		0	

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	8737	8727						

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9367	16362	9367 TO 16362		1200	
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
9367 TO 16362	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
02/02/2019	02/02/2019	24	→	194.0	826.0	2564.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
28/64	SI	650.0	→	194	826	2564		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	
	SI		→						

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

ELECTRONIC SUBMISSION #455863 VERIFIED BY THE BLM WELL INFORMATION SY:
** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED

Documents pending BLM approvals will
subsequently be reviewed and scanned

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
RUSTLER	942			RUSTLER	942
TOP OF SALT	1279			TOP OF SALT	1279
BOTTOM OF SALT	4605			BOTTOM OF SALT	4605
LAMAR	4828			LAMAR	4828
CHERRY CANYON	5782			CHERRY CANYON	5782
BONE SPRINGS LIMESTONE	8782			BONE SPRINGS LIMESTONE	8782

32. Additional remarks (include plugging procedure):

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 #455863 Verified by the BLM Well Information System.
For COG PRODUCTION LLC, sent to the Hobbs

Name (please print) AMANDA AVERYTitle AUTHORIZED REPRESENTATIVE

Signature _____ (Electronic Submission)

Date 02/25/2019

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.

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