

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 - 025-44629	⁵ Pool Name Wildcat; Bone Spring	⁶ Pool Code 97784
⁷ Property Code 314193	⁸ Property Name Eider Federal	⁹ Well Number 101H

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 1020	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 356	East/West line West	County Lea
¹² Lse Code P	¹³ Producing Method Code F	¹⁴ Gas Connection Date 2/10/19	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
312917	ACC	O
298751	Lucid	G

IV. Well Completion Data

²¹ Spud Date 8/22/18	²² Ready Date 2/10/19	²³ TD 16504'	²⁴ PBDT 16415'	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"	993'	800		
12 1/4"	9 5/8"	4800'	1400		
8 3/4"	5 1/2"	16484'	2555		
	2 7/8"	8701'			

V. Well Test Data

³¹ Date New Oil 2/10/19	³² Gas Delivery Date 2/10/19	³³ Test Date 2/10/19	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 1000#	³⁶ Csg. Pressure 750#
³⁷ Choke Size 28/64"	³⁸ Oil 580	³⁹ Water 2644	⁴⁰ Gas 776		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:
03/04/19

Phone:
575-748-6962

OIL CONSERVATION DIVISION

Approved by: *Karen Sharp*

Title: *Staff Mgr*

Approval Date:
3-6-19

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

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.5. Lease Serial No.
NMNM120907

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on page 2

RECEIVED

8. Well Name and No.
EIDER FEDERAL 101H9. API Well No.
30-025-4462910. Field and Pool or Exploratory Area
WILDCAT; BONE SPRING11. County or Parish, State
LEA COUNTY, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
COG PRODUCTION LLCContact: AMANDA AVERY
E-Mail: aavery@concho.com3a. Address
2208 W MAIN STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-69404. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 35 T24S R32E Mer NMP SWSW 240FSL 1020FWL
32.167475 N Lat, 103.650690 W Lon

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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Hydraulic Fracture
	<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 @ 16,425' and test csg to 8,503#. Good test.

10/2/18 to 10/20/18 Perf 9,407-16,400' (1170). Acdd w/59,724 gal 7 1/2%; frac w/11,137,350# sand & 12,432,588 gal fluid.

12/2/18 to 12/3/18 Drilled out CFP's. Clean down to PBTD @ 16,415'.

12/4/18 -12/5/18 Set 2 7/8" 6.5# L-80 tbg @ 8,701' packer @ 8,691'. Installed gas lift system.

2/10/19 Began flowing back & testing and date of first production

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

Electronic Submission #456628 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 03/04/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

ate

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 know States any false, fictitious or fraudulent statements or representations as to any matter within its jur.

Documents pending BLM approvals will
subsequently be reviewed and scanned.

United

(Instructions on page 2)

** OPERATOR-SUBMITTED ** OPERATOR-SUBMIT

LIMITED **

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

HOBBS OCD
MAR 06 2019
RECEIVED

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM120907	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator COG PRODUCTION LLC		7. Unit or CA Agreement Name and No.	
Contact: AMANDA AVERY E-Mail: aavery@concho.com		8. Lease Name and Well No. EIDER FEDERAL 101H	
3. Address 2208 W MAIN STREET ARTESIA, NM 88210		9. API Well No. 30-025-44629	
3a. Phone No. (include area code) Ph: 575-748-6940		10. Field and Pool, or Exploratory WILDCAT; BONE SPRINGS	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface SWSW Lot M 240FSL 1020FWL 32.167475 N Lat, 103.650690 W Lon Sec 35 T24S R32E Mer NMP At top prod interval reported below SWSW Lot M 240FSL 1020FWL 32.167475 N Lat, 103.650690 W Lon Sec 26 T24S R32E Mer NMP At total depth NWSW Lot L 2410FSL 356FWL 32.187976 N Lat, 103.652833 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 35 T24S R32E Mer NMP	
14. Date Spudded 08/22/2018		15. Date T.D. Reached 09/09/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 02/10/2019		17. Elevations (DF, KB, RT, GL)* 3522 GL	
18. Total Depth: MD 16504 TVD 9217		19. Plug Back T.D.: MD 16415 TVD 9217	
20. Depth Bridge Plug Set: MD 16425 TVD 9217		21. Type Electric & Other Mechanical Logs Run (Submit copy of each)	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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	993		800		0	
12.250	9.625 L80	40.0	0	4800		1400		0	
8.750	5.500 P110	17.0	0	16484		2555		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	8701	8691						

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRINGS	9407	16400	9407 TO 16400		1170	OPEN BONE SPRINGS
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
9407 TO 16400	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
02/10/2019	02/10/2019	24	→	580.0	776.0	2644.0			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	750.0	→	580	776	2644		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 #456624 VERIFIED BY THE BLM WELL INFORMATION SYS.

** 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	905			RUSTLER	905
TOP OF SALT	1242			TOP OF SALT	1242
BOTTOM OF SALT	4590			BOTTOM OF SALT	4590
LAMAR	4814			LAMAR	4814
CHERRY CANYON	5767			CHERRY CANYON	5767
BONE SPRINGS LIME STONE	8792			BONE SPRINGS LIME STONE	8792

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 #456624 Verified by the BLM Well Information System.
For COG PRODUCTION LLC, sent to the Hobbs**

Name (please print) AMANDA AVERYTitle AUTHORIZED REPRESENTATIVESignature (Electronic Submission)Date 03/04/2019

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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