

RECEIVED: 8/4/20	REVIEWER: DM	TYPE: OLM	APP NO: pDM2022338473
------------------	--------------	-----------	-----------------------

ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
- Geological & Engineering Bureau -
1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Applicant: COG Production, LLC	OGRID Number: 217955
Well Name: Gold Coast 26 Federal 1H	API: 30-025-40896
Pool: Wildcat; Bone Spring	Pool Code: 97964

SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW

- 1) **TYPE OF APPLICATION:** Check those which apply for [A]
- A. Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP (PROJECT AREA) ☐ NSP (PRORATION UNIT) ☐ SD
- B. Check one only for [I] or [II]
- [I] Commingling - Storage - Measurement
☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☒ OLM
- [II] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR

- 2) **NOTIFICATION REQUIRED TO:** Check those which apply.
- A. ☐ Offset operators or lease holders
B. ☐ Royalty, overriding royalty owners, revenue owners
C. ☐ Application requires published notice
D. ☐ Notification and/or concurrent approval by SLO
E. ☐ Notification and/or concurrent approval by BLM
F. ☐ Surface owner
G. ☐ For all of the above, proof of notification or publication is attached, and/or,
H. ☒ No notice required

FOR OCD ONLY	
<input type="checkbox"/>	Notice Complete
<input type="checkbox"/>	Application Content Complete

3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Jeanette Barron

Print or Type Name

Jeanette Barron
Signature

8/4/20
Date

575-746 6974
Phone Number

jbarron@concho.com
e-mail Address



August 4, 2020

Attn: Dean McClure
NM Oil Conservation Division
1220 South Saint Francis Drive
Santa Fe, New Mexico 87505

Re: Application for Administrative Approval
Off-lease Measurement – Oil Only

Dear Mr. McClure,

COG Production LLC respectfully requests approval for off-lease measurement - Oil only for the following wells:

Gold Coast 26 Federal 1H
API# 30-025-40896
Wildcat; Bone Spring
Ut. P, Sec. 35-T24S-R32E
Lea County, NM

Oil Production:

The oil production from these wells may be transported by truck to either the Red Hills Offload Station, located in Unit O, Section 4-T26S-R32E, or the Jal Offload Station, located in Unit D, Section 4-T26S-R37E, Lea County in the event the CTB on lease is over capacity or in the case of battery or pipeline repairs. Oil will remain segregated and will be measured by lact meter when offloading at the Offload Stations.

No owner notification is necessary. A letter from a certified Landman stating Concho owns 100% working interest is enclosed.

Please see the enclosed Administrative Application Checklist, C-107-B Application for Off Lease Measurement, plats for referenced wells, site facility diagram, maps with lease boundaries showing wells and facility locations, and copies of the submitted FMP sundries.

Thank you for your attention to this matter. If you have questions or need further information, please email me at jbarron@concho.com or call 575.748.6974.

Sincerely,

A handwritten signature in black ink that reads "Jeanette Barron".

Jeanette Barron
Regulatory Technician II

CORPORATE ADDRESS

One Concho Center | 600 West Illinois Avenue | Midland, Texas 79701
P 432.683.7443 | F 432.683.7441

ARTESIA WEST OFFICE

2208 Main Street | Artesia, New Mexico 88210
P 575.748.6940 | F 575.746.2096

District I

1625 N. French Drive, Hobbs, NM 88240

District II

811 S. First St., Artesia, NM 88210

District III

1000 Rio Brazos Road, Aztec, NM 87410

District IV1220 S. St Francis Dr. Santa Fe, NM
87505State of New Mexico
Energy, Minerals and Natural Resources Department**OIL CONSERVATION DIVISION**1220 S. St Francis Drive
Santa Fe, New Mexico 87505Form C-107-B
Revised August 1, 2011Submit the original
application to the Santa Fe
office with one copy to the
appropriate District Office.**APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)**OPERATOR NAME: COG Production LLCOPERATOR ADDRESS: 2208 W Main Street, Artesia, New Mexico 88210

APPLICATION TYPE:

☐ Pool Commingling ☐ Lease Commingling ☐ Pool and Lease Commingling ☒ Off-Lease Storage and Measurement (Only if not Surface Commingled)LEASE TYPE: ☐ Fee ☐ State ☒ FederalIs this an Amendment to existing Order? ☐ Yes ☐ No If "Yes", please include the appropriate Order No. _____Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
☐ Yes ☐ No**(A) POOL COMMINGLING**

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes

(2) Are any wells producing at top allowables? ☐ Yes ☐ No(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No.(4) Measurement type: ☐ Metering ☐ Other (Specify)(5) Will commingling decrease the value of production? ☐ Yes ☐ No If "yes", describe why commingling should be approved**(B) LEASE COMMINGLING**

Please attach sheets with the following information

(1) Pool Name and Code.

(2) Is all production from same source of supply? ☐ Yes ☐ No(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No(4) Measurement type: ☐ Metering ☐ Other (Specify)**(C) POOL and LEASE COMMINGLING**

Please attach sheets with the following information

(1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

(1) Is all production from same source of supply? ☒ Yes ☐ No

(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location.

(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.

(3) Lease Names, Lease and Well Numbers, and API Numbers.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Jeanette BarronTITLE: Regulatory Technician IIDATE: 8/4/20TYPE OR PRINT NAME Jeanette Barron TELEPHONE NO.: 575.748.6974E-MAIL ADDRESS: jbarron@concho.com

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office
☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-40896	² Pool Code 97964	³ Pool Name Wildcat; Bone Spring
⁴ Property Code 39605	⁵ Property Name Gold Coast 26 Federal	
⁷ OGRID No. 217955	⁶ Operator Name COG Production LLC	⁸ Well Number 1H
		⁹ Elevation 3561' GR


" Surface Location

UL or lot no. P	Section 26	Township 24S	Range 32E	Lot Idn	Feet from the 330	North/South line South	Feet from the 330	East/West line East	County Lea
--------------------	---------------	-----------------	--------------	---------	----------------------	---------------------------	----------------------	------------------------	---------------

" Bottom Hole Location If Different From Surface

UL or lot no. A	Section 26	Township 24S	Range 32E	Lot Idn	Feet from the 345	North/South line North	Feet from the 490	East/West line East	County Lea
¹¹ Dedicated Acres 160	¹² Joint or Infill	¹³ Consolidation Code	¹⁴ Order No.						

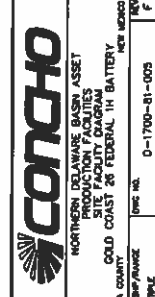
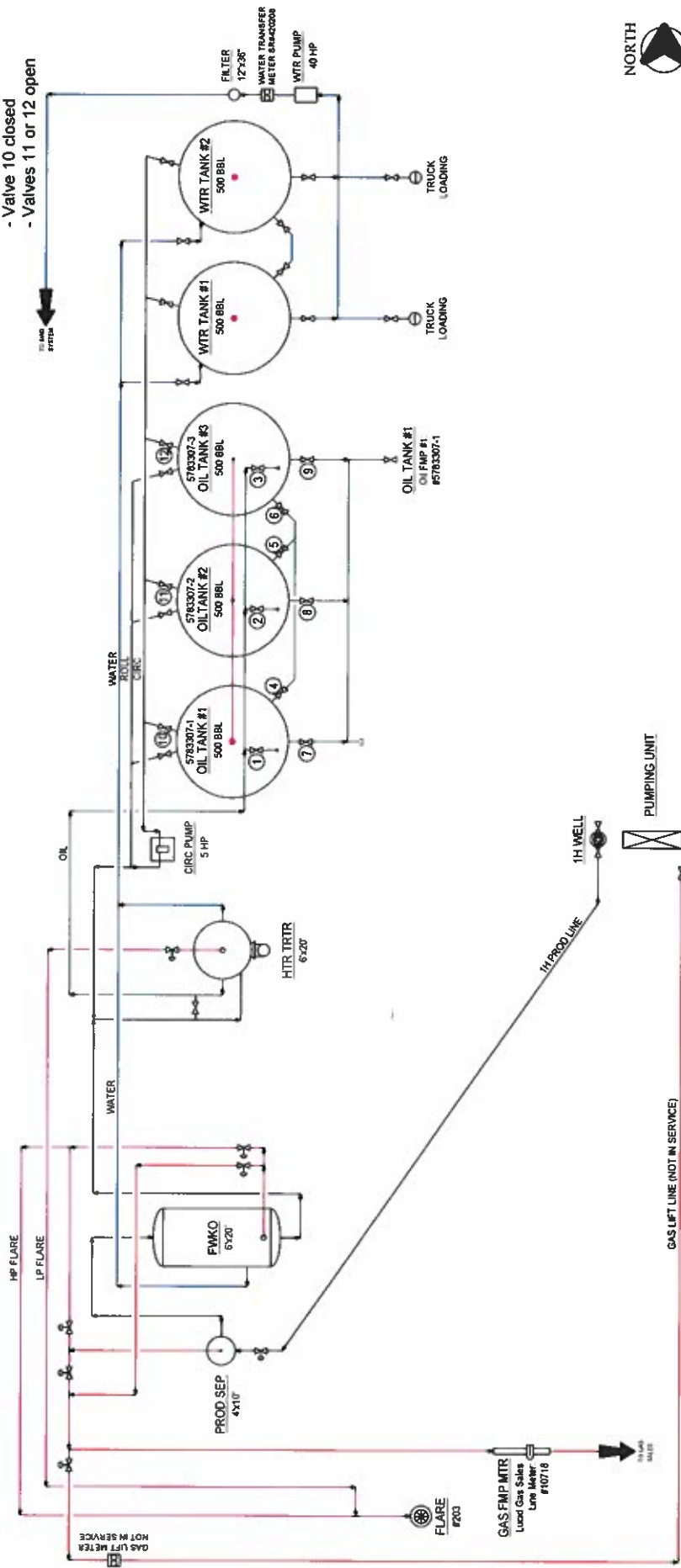
No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

			345'			" OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the Division.  Signature Date Jeanette Barron Printed Name jbaron@concho.com E-mail Address
			BHL		490'	
						"SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. REFER TO ORIGINAL PLAT Date of Survey Signature and Seal of Professional Surveyor:
						Certificate Number
			SHL		330'	
					330'	

GOLD COAST 26 FEDERAL 1H BATTERY
SESE SECTION 26, T24S, R32E, UNIT P
COORDS: 32.182461, -103.638327
LEA COUNTY, NM

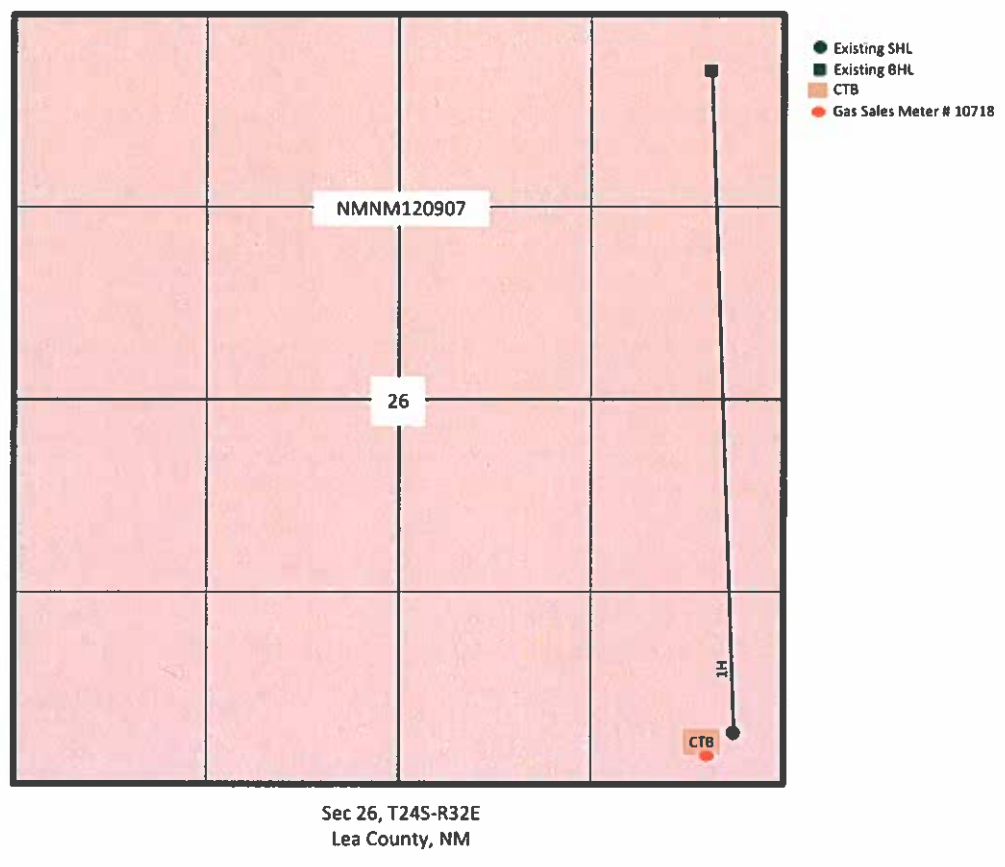
WELLS:
GOLD COAST 26 FEDERAL #001H: 30-025-40896

- Production Phase - Oil Tank #1**
- Valve 1 open
 - Valves 2 and 3 closed
 - Valves 4, 5, and 6 open
 - Valves 7, 8, and 9 closed
 - Valve 10 open
 - Valves 11 and 12 closed
- Sales Phase - Oil Tank #1**
- Valve 1 closed
 - Valves 2 or 3 open
 - Valve 4 closed
 - Valves 5 and 6 open
 - Valve 7 open
 - Valves 8 and 9 closed
 - Valve 10 closed
 - Valves 11 or 12 open



Ledger for Site Diagram									
Type of Lease: Federal									
Federal Lease #: NIMNM 120907									
Property Code: 39805									
OGRID #: 217955									
Flare/Vent:									
CONFIDENTIALITY NOTICE									
THIS DRAWING IS PROPERTY OF CONCHO OPERATING LLC AND IS LOANED TO THE BATTERY. IT IS TO BE USED ONLY FOR THE BATTERY AND IS NOT TO BE REPRODUCED OR COPIED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF CONCHO. ANY VIOLATION OF THIS NOTICE WILL BE PROSECUTED TO THE FULL EXTENT OF THE LAW.									
REFERENCE CHANGES									
NO.	DATE	DESCRIPTION	BY	CHK	APP.	ENGINEERING RECORD			
A	06/07/17	CHGK FOR NEW FIELD	CHG			DATE	BY		
B	11/01/17	UNLATCHED FOLD DOWN FOR NEW FIELD	CHG			DATE	BY		
C	05/23/18	UNLATCHED FOLD DOWN FOR NEW FIELD	CHG			DATE	BY		
D	06/07/17	UNLATCHED FOLD DOWN FOR NEW FIELD	CHG			DATE	BY		
E	07/20/19	REMOVED FROM FIELD NOTIFICATION	CHG			DATE	BY		
F	3/23/20	REMOVED FROM FIELD NOTIFICATION	CHG			DATE	BY		
CONCHO OPERATING LLC									
SITE SECURITY PLANS									
600 WEST ILLINOIS AVENUE									
MOLAND, TEXAS 79701									
LOCATED AT:									

Gold Coast 26 Federal 1H



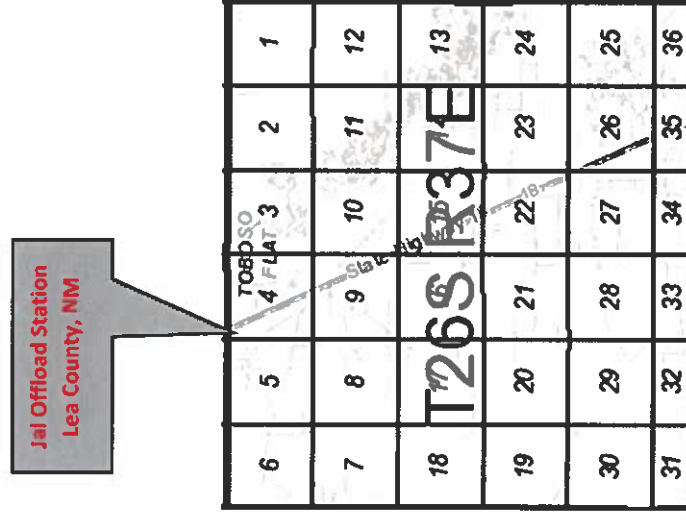
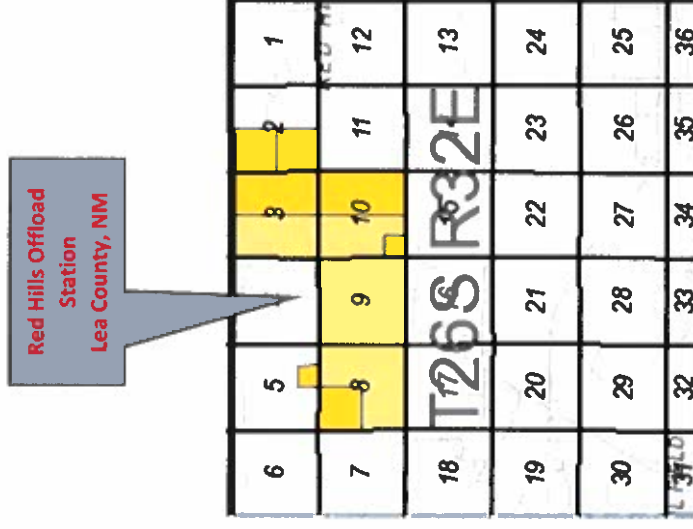
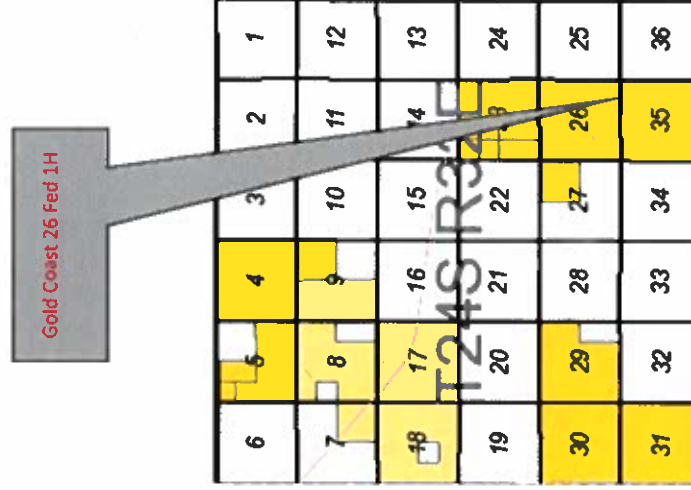
Gold Coast 26 Federal 1H



Gold Coast 26 Fed 1H

&

Red Hills and Jal Offload Station Map





Matt Solomon
Staff Landman

July 28, 2020

RE: Concho's working interest in the Gold Coast Fed 26 1H

To Whom It Concerns:

My name is Matt Solomon, and I am the landman that oversees the captioned well for COG Operating LLC ("Concho").

Regarding the captioned well the following statement is true:

- 1) Concho owns 100% of the working interest.

Respectfully submitted,

A handwritten signature in black ink, appearing to be "MS" or similar initials, written over the typed name.

Matt Solomon - CPL, J.D.
Staff Landman
432-685-4352 (o)
832-544-9492 (c)
msolomon@concho.com

Form 3160-5
(June 2015)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.*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

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.

GOLD COAST 26 FEDERAL 1H

2. Name of Operator

COG PRODUCTION LLC

Contact: JEANETTE BARRON

E-Mail: JBARRON@CONCHO.COM

9. API Well No.

30-025-40896

3a. Address

2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)

Ph: 575-748-6974

10. Field and Pool or Exploratory Area

WC-025G-07S243225C;LWR BS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Production Facility Changes
	<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.

COG PRODUCTION LLC RESPECTFULLY REQUESTS DESIGNATION OF GAS FACILITY MEASUREMENT POINTS FOR GOLD COAST 26 FED 1H BATTERY.

THE GAS FACILITY MEASUREMENT POINT IS GAS SALES METER # 10718 MEETS API AND AGA STANDARDS AND WILL MEASURE AND BE CALIBRATED ACCORDING TO ALL FEDERAL REQUIREMENTS AND REGULATIONS.

PLEASE SEE ATTACHED SITE FACILITY DIAGRAM

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

Electronic Submission #524121 verified by the BLM Well Information System
For COG PRODUCTION LLC, sent to the Hobbs

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY TECHNICIAN

Signature (Electronic Submission)

Date 08/04/2020

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: 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.

8. Well Name and No.
GOLD COAST 26 FEDERAL 1H9. API Well No.
30-025-4089610. Field and Pool or Exploratory Area
WC-025G-07S243225C;LWR BS11. County or Parish, State
LEA COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
COG PRODUCTION LLCContact: JEANETTE BARRON
E-Mail: JBARRON@CONCHO.COM3a. Address
2208 W MAIN STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-6974

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

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	Production Facility Changes
	<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 recomple 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 recompletion 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.

COG PRODUCTION LLC RESPECTFULLY REQUESTS DESIGNATION OF OIL FACILITY MEASUREMENT POINTS FOR GOLD COAST 26 FED 1H BATTERY.

OIL FACILITY MEASUREMENT POINTS WILL BE #1 TANK #5783307-1 AT THE BATTERY.

PLEASE SEE ATTACHED SITE FACILITY DIAGRAM

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

Electronic Submission #524120 verified by the BLM Well Information System
For COG PRODUCTION LLC, sent to the Hobbs

Name (Printed/Typed) JEANETTE BARRON

Title REGULATORY TECHNICIAN

Signature (Electronic Submission)

Date 08/04/2020

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 ****