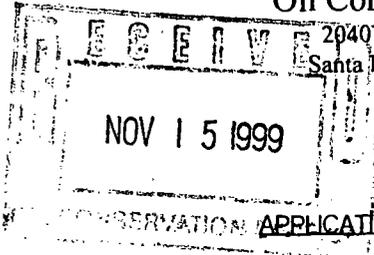


District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico
Energy Minerals and Natural Resources Department
Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

SUBMIT ORIGINAL
PLUS 2 COPIES
TO THE SANTA FE
OFFICE



NOV 15 1999

APPLICATION FOR NEW WELL STATUS

I. Operator and Well

Operator name & address Concho Resources Inc. 110 W. Louisiana, Ste 410; Midland, Tx 79701		OGRID Number 166111						
Contact Party Terri Stathem		Phone 915-683-7443						
Property Name Tomcat '17' Federal		Well Number 1						
		API Number 30025-34690						
UL P	Section 17	Township 23S	Range 32E	Feet From The 660	North/South Line South	Feet From The 660	East/West Line East	County Lea

II. Date/Time Information

Spud Date 9/15/99	Spud Time 12:45 PM	Date Completed 10/20/99	Pool Diamondtail Delaware
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- III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.
- IV. Attach a list of all working interest owners with their percentage interests.
- V. AFFIDAVIT:

State of Texas)
County of Midland) ss.

Joe Wright, being first duly sworn, upon oath states:

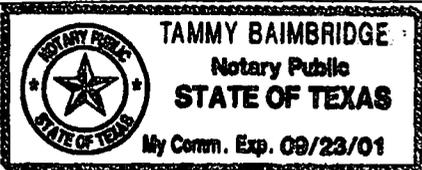
- I am the Operator, or authorized representative of the Operator, of the above-referenced well.
- To the best of my knowledge, this application is complete and correct.

Signature [Signature] Title Engineer Date 11/20/99

SUBSCRIBED AND SWORN TO before me this 10th day of November, 1999.

[Signature]
Notary Public

My Commission expires: 9.23.01



FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:
This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

Signature <u>[Signature]</u>	Title <u>P.E. Spec.</u>	<u>DEC 20 1999</u>
---------------------------------	----------------------------	--------------------

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: DEC 20 1999

NOTICE: The operator must notify all working interest owners of this New Well certification.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

5. LEASE DESIGNATION AND SERIAL NO.

NM 97891

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO.

TOMCAT '17' FEDERAL #1

9. API WELL NO.

30025-34690

10. FIELD AND POOL, OR WILDCAT

DIAMONDTAIL DELAWARE

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

17, T-23S, R-32E

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 DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
CONCHO RESOURCES INC.

3. ADDRESS AND TELEPHONE NO.
110 W. LOUISIANA STE 410; MIDLAND TX 79701 (915) 683-7443

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface
660' FSL & 660' FEL, SEC. 17, T-23S, R-32E
At top prod. interval reported below
SAME
At total depth

14. PERMIT NO. _____ DATE ISSUED
08/30/99

12. COUNTY OR PARISH
LEA

13. STATE
NM

15. DATE SPUNDED 09/15/99 16. DATE T.D. REACHED 10/03/99 17. DATE COMPL. (Ready to prod.) 10/20/99 18. ELEVATIONS (DF, RKB, RT, GE, ETC.)* 3662 19. ELEV. CASING HEAD

20. TOTAL DEPTH, MD & TVD 9100 21. PLUG, BACK T.D., MD & TVD 8700 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS XX CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)*
8429-8448' Delaware
7381-8076' Delaware 25. WAS DIRECTIONAL SURVEY MADE
No

26. TYPE ELECTRIC AND OTHER LOGS RUN
GR/CBL/CCL 27. WAS WELL CORED
No

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13-3/8	48	650.77	17-1/2	750 SX 'C' + ADDITIVES	0
8-5/8	32	4762	11	1350 SX 'C' + ADDITIVES	0
5-1/2	17	8800	7-7/8	650 SX 'H'	0

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8	8015	

31. PERFORATION RECORD (Interval, size and number)
8429-8448 (2 SPF - 41 HOLES)
7381-8076 (2 SPF - 45 HOLES)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8429-8448	Frac w/ 60700# 16/30 Ottawa + 12,000# 16/30 RC
7381-8076	Frac w/ 26620# 16/30# sd

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
10/21/99	pumping 2-1/2" X 1-1/2" X 24' RHBC	prod					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
11/01/99	24			174	140	193	804
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
	50		174	140	193	41.6	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
sold TEST WITNESSED BY
Mark Hulse

35. LIST OF ATTACHMENTS
C102, Logs, Letter of Confidentiality, C105

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED [Signature] TITLE Production Analyst DATE 11/04/99

*(See Instructions and Spaces for Additional Data on Reverse Side)

37. SUMMARY OF POROUS ZONES: (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):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
BELL CANYON (TOP OF LAMAR)	4756		SAND & SHALE
CHERRY CANYON	5605		SAND & SHALE
BRUSHY CANYON	6880		SAND & SHALE
BONE SPRING	8620		LIME & SHALE

38. GEOLOGICAL MARKERS

38. GEOLOGICAL MARKERS

NAME	TOP		NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH		MEAS. DEPTH	TRUE VERT. DEPTH
BELL CANYON T OF LAMAR	4756				
CHERRY CANYON	5605				
BRUSHY CANYON	6880				
BONE SPRING	8620				

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT **BLM - CARLSBAD**

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
CONCHO RESOURCES INC.

3. Address and Telephone No.
110 WEST LOUISIANA, SUITE 410, MIDLAND, TX 79701 915 683-7441

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 660' FEL, SEC. 17, T-23S, R-32E, LEA COUNTY, NM

5. Lease Designation and Serial No.
NM-97891

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
TOMCAT "17" FED. #1

9. API Well No.

10. Field and Pool, or Exploratory Area
SAND DUNES-BONE SPRING

11. County or Parish, State
LEA, NM

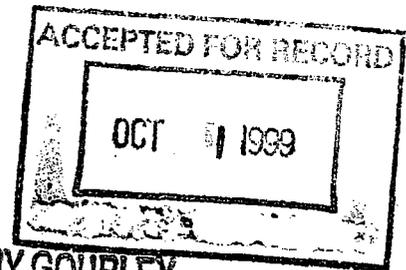
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>SPUD & SET SURFACE & INTER. CSG.</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- 9-15-99 SPUD 17-1/2" HOLE @ 12:45PM.
 RIH & SET 13-3/8" SURFACE CSG @ 650.77'. CMT W/LEAD: 500 SX CMT W/35/65 POZ "C" 2% CACL + 1/4#/SX FLOCELE, TAILED W/250 SX CMT W/"C" + 2% CACL.
 CIRC 165 SX TO PIT.
- 9-24-99 RIH & SET 8-5/8" INTERMEDIATE CSG @ 4762.00'. CMT W/LEAD: 1150 SX 50/50 POZ "C" CONTAINING 5% SALT & 10% GEL MIXED @ 11.8 PPG. FOLLOWED BY TAIL: 200 SX "C" CONTAINING 2% CACL MIXED @ 14.8 PPG.
 CIRC. 225 SX TO PIT.



(ORIG. SGD.) GARY GOURLEY

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

Signed Sherry Conrad Title AGENT Date 09/30/99

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes 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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM97891
2. Name of Operator CONCHO RESOURCES INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 110 W. LOUISIANA STE 410; MIDLAND TX 79701 (915) 683-7443	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL & 660' FEL, SEC. 17 T-23S, R-32E	8. Well Name and No. Tomcat '17' Federal #1
	9. API Well No. 30025 34690
	10. Field and Pool, or Exploratory Area SAND DUNES BONE SPRING
	11. County or Parish, State LEA CO., NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other SET PROD CSG
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)
10-3-99 RIH W/ 5-1/2" CSG & SET @ 8800' & CMT W/ 650 SX 35/65 POZ 'H' + ADDITIVES. TOC @ 4432'. RELEASE RIG @ 12:00 MIDNIGHT. WOCU.

ACCEPTED FOR RECORD
NOV 02 1999
BLM

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

Signed [Signature] Title PRODUCTION ANALYST Date 10/27/99

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes 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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
CONCHO RESOURCES INC.

3. Address and Telephone No.
110 W. LOUISIANA STE 410; MIDLAND, TX 79701 (915) 683-7443

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 660' FEL, Sec. 17, T-23S, R-32E

5. Lease Designation and Serial No.
NM 97891

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Tomcat '17' Federal #1

9. API Well No.
30025-34690

10. Field and Pool, or Exploratory Area
Diamondtail Delaware

11. County or Parish, State
LEA, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Completion</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

9/15/99 Spud well @ 12:45 PM. RIH w/ 13-3/8" csg & set @ 650.77'. Cmt w/ 750 sx 'C'. Circ to pit.
 9/24/99 RIH & set 8-5/8" csg @ 4762'. Cmt w/ 1350 sx 'C'. Circ to pit.
 10/3/99 RIH w/ 5-1/2" prod csg & set @ 8800'. Cmt w/ 650 sx 'H'. TOC 4432'. Release Rig @ 12:00 midnight.
 10/5/99 Perf 2 JSPF @ 8429-8448' (41 holes).
 10/6/99 Frac 8429-48 w/ 60,700# 16/30 Ottawa + 12,000# 16/30 RC sd.
 10/7/99 Set pumping unit & production tanks.
 10/9/99 Perf 2 JSPF @ 7381-8076' (45 holes).
 10/11/99 Swab well.
 10/12/99 Frac 8064-76 w/ 26620# 16/30 sand & 250 bbls gel.
 10/13/99 to 10-16-99 Swab well.
 10/18/99 RIH w/ 2-7/8" tbg @ set @ 8015'.
 10/19/99 RIH w/ rods & pump.
 10/20/99 Start pumping @ 12:00 PM.
 10/21/99 to 10/31/99 testing well
 11/1/99 IP:174 BO, 193 BW, 140 MCF.

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

Signed *Mike Smith* Title Production Analyst Date 11/10/99

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:

Concho Resources Inc.
TOMCAT '17' FEDERAL NO. 1

Working Interest Owners:	WORKING INTEREST %
Concho Resources Inc.	50%
Santa Fe Snyder	50%