Submit To Appropriate District Office State Lease - 6 copies					State of New M			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Re	Form C-105 evised June 10, 2003
Fee Lease - 5 copies District I	. 00240	E	Energy, Minerals and Natural Resources				WELL API NO.							
1625 N French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Crard Avenue Arters NM 88240 Oil Conservation Division								30-015-37506						
1301 W Grand Avenue, Artesia, NM 88210 District III				1220 South St. Francis Dr.					5. Indicate 7	Type o	of Leas	se FEE		
1000 Rio Brazos Rd , A District IV	District IV Santa Fe, NM 87505 State Oil & Gas Lease No.													
1220 S St. Francis Dr					ETION DEDOE	эт /	A NID I	06			. co 2012			
la Type of Well:	WELL COMPLETION OR RECOMPLETION REPORT AND LOG							7. Lease Name or Unit Agreement Name						
OIL WEL	L 🛛	GAS WE	LL 🔲 DR	Υ	OTHER				\leftarrow			J		
b Type of Completion. NEW WORK DEEPEN DIFF WELL OVER BACK RESVR OTHER 2. Name of Operator COG Operating LLC 3 Address of Operator 550 W. Texas Ave., Suite 100 Midland, TX 79701 4. Well Location Unit Letter O: 990 Feet From The South Line and 1650 Feet From The East Line								ate						
2. Name of Operator 8 Well No.														
COG Operating LLC 2														
3 Address of Opera	tor				(•	OC,	, P	沙 /	9. Pool name or	Wildca	ıt		
550 W. Texa	s Ave.	, Suite 1	00 Midland	, TX 79	701	_	- ($\frac{\sqrt{\sqrt{2}}}{\sqrt{2}}$		Empire;	Glorie	eta-Ye	so Eas	st 96210
4. Well Location					•		" SIN	/						
Unit Letter_	<u>O</u> :	990	Feet From The	S	outhLine	and_	165	50	_ Fee	et From The	East			Line
	14		Township	17S	Range		28E			NMPM				Eddy County
7/22/11		te T D Rea 7/28/11	•		mpl. (Ready to Prod) 8/17/11				36	RKB, RT, GR, 40' GR	etc)			Casinghead
15 Total Depth] 1	16. Plug B	ack T D.		Multiple Compl. How ones?	Man		18 Interv Drilled B		Rotary Tools			Cable To	ools
5405			358						,	. X				
	19 Producing Interval(s), of this completion - Top, Bottom, Name 3676 - 4920 Yeso 20. Was Directional Survey Made No													
21. Type Electric an	d Other			tron Ga	ımma Ray/CCL					22. Was Well	Cored	1	No	
23.		ООПР	SHOULCU IVC		SING RECOR	RD ((Repo	rt all s	trin	gs set in w	ell)			
CASING SIZE WEIGHT LB /FT DEPTH SET HOLE SIZE CEMENTING RECORD AMOUNT PULLED						OUNT PULLED								
		<u>48</u> 24		254										
8 5/8			17	+	5405		7-7/8			900				
3 //2				<u> </u>			<u> </u>							
24.			T nommon	LIN	ER RECORD	Lac	n en		25.		JBINC			DA OVER DET
SIZE	TOP		BOTTOM		SACKS CEMENT	SC	REEN		SIZ	2 7/8"	4852	TH SET		PACKER SET
			 					·		- 110	7002			
26 Perforation re				T	, ,					ACTURE, CEI				
		, 26 hole				DE		TERVAL - 3940	<u></u>	AMOUNT AN			rerial achme	
4080 - 4300 1 SPF, 26 holes 4390 - 4610 1 SPF, 26 holes								- 4300		 			achme	
4700 - 4920 1 SPF, 26 holes			OPEN			4390 - 4610			See attachment					
								- 4920			S	See att	achme	nt
28			<u> </u>	 			UCTI		,	In u a	/D :	~:		
Date First Production					owing, gas lift, pumpin	_	•)	Well Status	Prod o		,	
9/21/		T . 1			using a 2 ½" x 2'			np	-	NACUE	137 .		ducing	
Date of Test 9/21/11	Hours	1 estea 24	Choke Siz	e	Prod'n For Test Period		l – Bbl 299	,	Gas	S – MCF	water	r – Bbl		Gas – Oil Ratio
Flow Tubing	Casing	Pressure	Calculate	1 24-	Oil – Bbl.		Gas – N			204 Water – Bbl	Ι	1157		682 PI – <i>(Corr)</i>
Press Hour Rate 38.7						. ,								
29 Disposition of G	29 Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By													
30 List Attachment	Sold Kent Greenway													
Jo List Attachment	3				Logs, C10	2 C	1103 C	104						
31 I hereby certify	y that th	ne inform	ation shown	n both s	ides of this form as	z, c true	and cor	nplete to	the	best of my kno	wledge	and b	elief	
Signature E-mail Address														

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

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			SANDS (OR GAS OR ZONES
No. 1, from	to	No. 3, from	to	
		No. 4, from		
	IMPORT			
	er inflow and elevation to which			
No. 1, from	to	feet	******************************	
No. 2, from	toto	feet	************************	
		feet		
		DD (Attack additional about it		

From	То	Thickness In Feet	· Lithology	From	To ′	Thickness In Feet	Lithology
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Firecracker State #2 API#: 30-015-37506 EDDY, NM

C-105 (#27) ADDITIONAL INFORMATION

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.					
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED				
3676 - 3940	Acidized w/3000 gals 15% HCL.				
	Frac w/116,330 gals gel, 142,211# 16/30 Brown				
	sand, 41,649# 16/30 CRC				

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.					
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED				
4080 - 4300	Acidized w/3500 gals 15% HCL.				
	Frac w/116,033 gals gel, 147,530# 16/30 Brown				
	sand, 26,876# 16/30 CRC				

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.						
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED					
4390 - 4610	Acidized w/3500 gals 15% HCL.					
	Frac w/113,381 gals gel, 145,758# 16/30 Brown					
	sand, 32,465# 16/30 CRC					

27 ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.						
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED					
4700 - 4920	Acidized w/3500 gals 15% HCL.					
	Frac w/113,731 gals gel, 145,493# 16/30 Brown					
	sand, 33,389# 16/30 CRC					