

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**

<sup>1</sup> Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		<sup>2</sup> OGRID Number 229137
		<sup>3</sup> Reason for Filing Code/ Effective Date NW
<sup>4</sup> API Number 30 - 015-42016	<sup>5</sup> Pool Name Hackberry; Bone Spring, North	<sup>6</sup> Pool Code 97056
<sup>7</sup> Property Code 35819	<sup>8</sup> Property Name Blue Thunder 5 Federal Com	<sup>9</sup> Well Number 5H

**II. <sup>10</sup> Surface Location**

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
L	4	19S	31E		1630	South	255	West	Eddy

**<sup>11</sup> Bottom Hole Location**

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
L	5	19S	31E		1885	South	350	West	Eddy
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date 6/13/14	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
278421	Holly Refining & Marketing Company, LLC P.O. Box 159 Artesia, NM 88211-0159	O
36785	DCP Midstream, LP 10 Desta Dr - Suite 2500 Midland, TX 79705-4528	G

**IV. Well Completion Data**

<sup>21</sup> Spud Date 2/25/14	<sup>22</sup> Ready Date 5/15/14	<sup>23</sup> TD 13705'	<sup>24</sup> PBSD 13627'	<sup>25</sup> Perforations 9102-13540'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/8"	709'	625 sx		
12 1/4"	9 5/8"	2800'	900 sx		
7 7/8"	5 1/2"	13631'	2525 sx		
	2 7/8"	8243'			

**V. Well Test Data**

<sup>31</sup> Date New Oil 5/18/14	<sup>32</sup> Gas Delivery Date 6/13/14	<sup>33</sup> Test Date 6/17/14	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 340#	<sup>36</sup> Csg. Pressure 100#
<sup>37</sup> Choke Size	<sup>38</sup> Oil 731	<sup>39</sup> Water 716	<sup>40</sup> Gas 550	<sup>41</sup> Test Method Pumping	

<sup>42</sup> 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: *Stormi Davis*  
Printed name: Stormi Davis  
Title: Regulatory Analyst  
E-mail Address: sdavis@concho.com  
Date: 6/30/14  
Phone: 575-748-6946

OIL CONSERVATION DIVISION	
Approved by: <i>[Signature]</i>	Title: <i>District Supervisor</i>
Approval Date: <i>7-3-14</i>	
Pending BLM approvals will subsequently be reviewed and scanned	

*3160-4*

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 DESIGNATION AND SERIAL NO.

NMNM105217

1a. Type of Well  Oil Well  Gas Well  Dry  Other  
 b. Type of Completion  New Well  Workover  Deepen  Plug Back  Diff. Resvr.  
 Other \_\_\_\_\_

6. INDIAN ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT

2. Name of Operator  
COG Operating LLC

8. FARM OR LEASE NAME  
Blue Thunder 5 Federal Com #5H

3. Address  
2208 W. Main Street  
Artesia, NM 88210  
 3a. Phone No. (include area code)  
575-748-6940

9. API WELL NO.  
30-015-42016

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
 At surface 1630' FSL & 255' FWL, Unit L (NWSW) Sec 4-T19S-R31E  
 At top prod. Interval reported below  
 At total depth 1885' FSL & 350' FWL, Unit L (NWSW) Sec 5-T19S-R31E

10. FIELD NAME  
Hackberry; Bone Spring, North  
 11. SEC. T. R. M., OR BLOCK AND SURVEY OR AREA 4 T 19S R 31E  
 12. COUNTY OR PARISH Eddy  
 13. STATE NM

14. Date Spudded 2/25/14  
 15. Date T.D. Reached 3/13/14  
 16. Date Completed 5/15/14  
 D & A  Ready to Prod.

17. ELEVATIONS (DF, RKB, RT, GR, etc.)\*  
3565' GR 3583' KB

18. Total Depth: MD 13705' TVD 8887'  
 19. Plug back T.D.: MD 13627' TVD 8887'  
 20. Depth Bridge Plug Set: MD TVD

21. Type Electric & other Logs Run (Submit a copy of each)  
None  
 22. Was well cored?  No  Yes (Submit analysis)  
 Was DST run?  No  Yes (Submit report)  
 Directional Survey?  No  Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/ Grade	Wt. (#/ft.)	Top (MD)	Bottom(MD)	Stage Cemen- ter Depth	No. of Sk. & Type of Cement	Slurry Vol. (Bbl)	Cement Top*	Amount Pulled
17 1/2"	13 3/8" J55	54.5#	0	709'	None	625 sx		0	None
12 1/4"	9 5/8" J55	36#	0	2800'	None	900 sx		0	None
7 7/8"	5 1/2" P110	17#	0	13631'	None	2525 sx		0	None

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 7/8"	8243'							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. of Holes	Perf. Status
A) Bone Spring	9102'	13540'	9102-13490'	0.43	504	Open
B)			13530-13540'		60	Open
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
See Attached	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
5/18/14	6/17/14	24	→	731	550	716			Pumping
Choke Size	Tbg. Press Flwg. SI	Csg. Press.	24 Hr. Rate	Oil Bbl	Gas MCF	Water Bbl	Gas: Oil Ratio	Well Status	
	340#	100#	→	731	550	716		Producing	

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
			→					
Choke Size	Tbg. Press Flwg. SI	Csg. Press.	24 Hr. Rate	Oil Bbl	Gas MCF	Water Bbl	Gas: Oil Ratio	Well
			→					

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.

31. Formation (Log) Markers:

Formation	Top	Bottom	Descriptions Contents, Etc.	Name	Top
					Measured Depth
Delaware	4409'	6449'		Rustler	601'
	6450'	8887'		Top of Salt	670'
Bone Spring				Tansill	2177'
				Yates	2362'
				Seven Rivers	2692'
				Grayburg	3802'
				Cherry Canyon	4409'
				Brushy Canyon	4844'
				Bone Spring Lm	6450'
				1st Bone Spring	7829'
			2nd Bone Spring	8610'	
				TVD	8887'

32. Additional remarks (include plugging procedure):

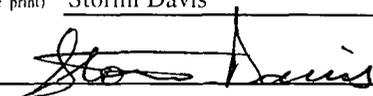
33. Indicate which items have been attached by placing a check in the appropriate boxes:

- Electrical/Mechanical Logs (1 full set required)     
  Geologic Report     
  DST Report     
  Directional Survey  
 Sundry Notice for plugging and cement verification     
  Core Analysis     
  Other: Deviation Report

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)\*

Name (please print) Stormi Davis

Title Regulatory Analyst

Signature 

Date 6/30/14

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.

# BLUE THUNDER 5 FEDERAL COM #5H

30-015-42016

Sec 4-T19S-R31E

<u>Perfs</u>	<u>7 1/2% Acid (Gal)</u>	<u>Sand (#)</u>	<u>Fluid (Gal)</u>
13272-13490'	7024	690399	696696
12955-13169'	5982	447027	332682
12634-12848'	6066	451530	386232
12313-12527'	6048	449846	320208
11992-12206'	6048	450230	308364
11674-11885'	6048	447729	313194
11350-11564'	6006	456560	312018
11029-11243'	6426	454367	310170
10707-10922'	5670	453077	311724
10386-10596'	6066	453076	308868
10065-10279'	6216	452088	308574
9744-9958'	6048	449890	313068
9423-9635'	6048	448524	315840
9102-9316'	6024	452894	307314
<b>Totals</b>	<b>85720</b>	<b>6557237</b>	<b>4844952</b>

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**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  
 Oil Well     Gas Well     Other

2. Name of Operator  
 COG Operating LLC

3a. Address  
 2208 W. Main Street  
 Artesia, NM 88210

3b. Phone No. (include area code)  
 575-748-6946

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
 SHL: 1630' FSL & 255' FWL, Unit L (NWSW) Sec 4-T19S-R31E  
 BHL: 1885' FSL & 350' FWL, Unit L (NWSW) Sec 5-T19S-R31E

Lat.  
 Long.

5. Lease Serial No.  
 NMNM105217

6. If Indian, Allottee, or Tribe Name

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

8. Well Name and No.  
 Blue Thunder 5 Federal Com #5H

9. API Well No.  
 30-015-42016

10. Field and Pool, or Exploratory Area  
 Hackberry; Bone Spring, North

11. County or Parish, State  
 Eddy                      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"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production ( Start/ Resume)	<input type="checkbox"/> Water Shut-off	
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<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 type="checkbox"/> Other	
	<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 checked="" 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 recompleate horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

**Required Information for the Disposal of Produced Water:**

- 1) Name of formation producing water on lease: Bone Spring
- 2) Amount of water produced in barrels per day: 1200 BWPD
- 3) How water is stored on lease: 2 - 500 bbl fiberglass tanks
- 4) How water is moved to disposal facility: Trucked
- 5) Disposal Facility:
  - a) Facility Operator Name: Mesquite SWD, Inc.
  - b) Name of facility or well name & number: Cedar Lake 36 State #1 (Order SWD-1275)
  - c) Type of facility or well: WDW
  - d) Location by 1/4, 1/4, Section, Township & Range: NESW, Sec 36-T17S-R30E

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

Name (Printed/Typed)  
 Stormi Davis

Signature: *Stormi Davis*

Title: Regulatory Analyst

Date: 6/30/14

**THIS SPACE FOR FEDERAL OR STATE APPROVAL**

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: \_\_\_\_\_

*Pending BLM approvals will subsequently be reviewed and scanned*

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.