

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

HOBBES OGD  
RECEIVED

Submit one copy to appropriate District Office

OCT 31 P.M. /

AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address <b>COG Operating LLC</b> One Concho Center 600 W. Illinois Ave. Midland, TX 79701		<sup>2</sup> OGRID Number 229137
<sup>4</sup> API Number 30 - 025-43131 /		<sup>3</sup> Reason for Filing Code/ Effective Date NW Effective 9/30/16 ✓
<sup>5</sup> Pool Name Maljamar; Yeso, West	<sup>6</sup> Pool Code 44500 ✓	
<sup>7</sup> Property Code 315671	<sup>8</sup> Property Name Ragnar Federal Com	<sup>9</sup> Well Number 25H

**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
B	22	17S	32E		185	North	2358	East	Lea

**<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
B	15	17S	32E		352	North	2281	East	Lea
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P /	<sup>14</sup> Gas Connection Date 9/30/16	<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
27841	HollyFrontier Refining & Marketing LLC	O
36785	Frontier	G

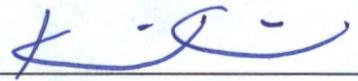
**IV. Well Completion Data**

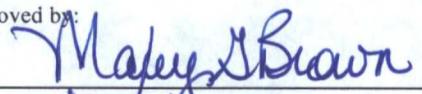
<sup>21</sup> Spud Date 6/14/16 /	<sup>22</sup> Ready Date 9/30/16 ✓	<sup>23</sup> TD 11,146MD, 6280TVD /	<sup>24</sup> PBTB 11,068 /	<sup>25</sup> Perforations 6608 - 11,048 ✓	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17-1/2	13-3/8	759	825		
12-1/4	9-5/8	2210	675		
8-3/4	7	5629			
7-7/8	5-1/2	11,136	2850		
	2-7/8 tbg	5725			

**V. Well Test Data**

<sup>31</sup> Date New Oil 10/12/16 ✓	<sup>32</sup> Gas Delivery Date 10/12/16 ✓	<sup>33</sup> Test Date 10/14/16 ✓	<sup>34</sup> Test Length 24hrs	<sup>35</sup> Tbg. Pressure 70	<sup>36</sup> Csg. Pressure 70
<sup>37</sup> Choke Size	<sup>38</sup> Oil 370 /	<sup>39</sup> Water 1550 /	<sup>40</sup> Gas 204 /	<sup>41</sup> Test Method P	

<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:   
Printed name: Kanicia Castillo  
Title: Lead Regulatory Analyst  
E-mail Address: kcastillo@concho.com  
Date: 10/26/16  
Phone: 432-685-4332

OIL CONSERVATION DIVISION  
Approved by:   
Title: Dist Supervisor  
Approval Date: 11-16-16 /  
Pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
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.*

**HOBBS OCD**  
OCT 30 2016  
**RECEIVED**

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. RAGNAR FEDERAL COM 25H
2. Name of Operator COG OPERATING LLC Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com	9. API Well No. 30-025-43131
3a. Address 600 W ILLINOIS AVE MIDLAND, TX 79701	10. Field and Pool, or Exploratory MALJAMAR; YESO, WEST
3b. Phone No. (include area code) Ph: 432-685-4332	11. County or Parish, and State LEA COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T17S R32E Mer NMP 185FNL 2358FEL	

12. CHECK APPROPRIATE BOX(ES) 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"/> Alter 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 checked="" type="checkbox"/> Other Drilling Operations
	<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 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 recomplete 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

7/06/16 Test csg to 4500psi for 10mins, good.  
7/07/16 Drilled 10' of new formation to 10,471. Spotted 500 gals acid.  
7/11/16 Pressure test frac valve to 7200#, good test.  
7/25/16 - 7/28/16 Perf 25 stages @ 6608 ? 11,048 w/6 SPF, 900 holes. Acidize 25 stages w/98,952 gals 7.5% HCL. Frac w/329,054 gals treated water, 4,731,392 gals FR water, 1,491,770# 100 mesh sand, 2,427,980# 40/70 White sand, 521,434# 40/70 CRC.  
9/27/16 ? 9/28/16 Drill out plugs. Clean out to PBSD 11,068.  
9/30/16 RIH w/ESP, 172jts 2-7/8" J55 tbg, EOT @ 5725? Hang on.

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

**Electronic Submission #355904 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Hobbs**

Name (Printed/Typed) KANICIA CASTILLO	Title PREPARER
Signature (Electronic Submission)	Date 10/26/2016

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

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 and intentionally to provide to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

OCT 31 P.M.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.  
NMLC029509B

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name	
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 _____		7. Unit or CA Agreement Name and No.	
2. Name of Operator COG OPERATING LLC		Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com	
3. Address 600 W ILLINOIS AVE ONE CONCHO CENTER MIDLAND, TX 79701		3a. Phone No. (include area code) Ph: 432-685-4332	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 22 T17S R32E Mer NMP At surface Lot B 185FNL 2358FEL Sec 15 T17S R32E Mer NMP At top prod interval reported below Lot O 330FSL 2287FEL Sec 15 T17S R32E Mer NMP At total depth Lot B 352FNL 2281FEL		8. Lease Name and Well No. RAGNAR FEDERAL COM 25H	
14. Date Spudded 06/14/2016		15. Date T.D. Reached 06/29/2016	
18. Total Depth: MD 11146 TVD 6280		19. Plug Back T.D.: MD 11068 TVD	
20. Depth Bridge Plug Set: MD TVD		9. API Well No. 30-025-43131	
10. Field and Pool, or Exploratory MALJMAR;YESO, WEST		11. Sec., T., R., M., or Block and Survey or Area Sec 22 T17S R32E Mer NMP	
12. County or Parish LEA		13. State NM	
17. Elevations (DF, KB, RT, GL)* 4014 GL		16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 09/30/2016	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CN		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 checked="" type="checkbox"/> No <input 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
12.250	9.625 J55	40.0		2210		675			
8.750	7.000 L80	29.0		5629					
8.750	5.000 L80	17.0		11136		2850			
17.500	13.375 J55	54.5	0	759		825		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	5725							

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) YESO	6608	11048	6608 TO 11048	0.430	900	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
6608 TO 11048	ACIDIZE W/ 98,952 7.5% ACID, FRAC W/ 329,054 GALS TREATED WATER, 4,731,392 GALS FR WATER,

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
10/12/2016	10/14/2016	24	→	370.0	204.0	1550.0	36.2	0.60	ELECTRIC PUMP SUB-SURFACE
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
		70.0	→	370	204	1550	551	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gr	Gr
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Wei	
			→						

Pending BLM approvals will subsequently be reviewed and scanned

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #356024 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

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.)  
FLARED

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	851		ANHYDRITE	RUSTLER	851
TANSIL	2079		SALT	TANSIL	2079
QUEEN	3167		SANDSTONE	QUEEN	3167
GRAYBURG	3535		SANDSTONE & DOLOMITE	GRAYBURG	3535
SAN ANDRES	3910		DOLOMITE & LIMESTONE	SAN ANDRES	3910
PADDOCK	5474		DOLOMITE & ANHYDRITE	PADDOCK	5474
BLINEBRY	6126		DOLOMITE & ANHYDRITE	BLINEBRY	6126

32. Additional remarks (include plugging procedure):  
Logs will be submitted in WIS.

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 #356024 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Hobbs**

Name (please print) KANICIA CASTILLO Title PREPARER

Signature \_\_\_\_\_ (Electronic Submission) Date 10/26/2016

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**\*\* ORIGINAL \*\* ORIGINAL \*\***