

| | | | | | | | | | | | |
|---|----------------------------------|--|---------------------------------|---|--|--|---|---------------|------------|--------|--|
| Submit To Appropriate District Office Two Copies 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 and Natural Resources | | | Form C-105 Revised August 1, 2011 | | | | | | |
| | | Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 | | | 1. WELL API NO. 30-025-41764 | | | | | | |
| | | | | | 2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN | | | | | | |
| | | | | | 3. State Oil & Gas Lease No. | | | | | | |
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG | | | | | | | | | | | |
| 4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC) | | | | 5. Lease Name or Unit Agreement Name COOPER JAL UNIT | | | | | | | |
| | | | | 6. Well Number: 603 | | | | | | | |
| 7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER | | | | | | | | | | | |
| 8. Name of Operator LEGACY RESERVES OPERATING LP | | | | 9. OGRID 240974 | | | | | | | |
| 10. Address of Operator PO BOX 10848 MIDLAND, TX 79702 | | | | 11. Pool name or Wildcat JALMAT;TAN-YATES-7RVRS/ LANGLIE MATTIX;7RVRS-Q-G | | | | | | | |
| 12. Location | Unit Ltr | Section | Township | Range | Lot | Feet from the | N/S Line | Feet from the | E/W Line | County | |
| Surface: | O | 24 | 24S | 36E | | 675 | SOUTH | 2575 | EAST | LEA | |
| BII: | | | | | | | | | | | |
| 13. Date Spudded 5/4/14 | 14. Date T.D. Reached 5/12/14 | 15. Date Rig Released 5/12/14 | | 16. Date Completed (Ready to Produce) 5/24/14 | | 17. Elevations (DF and RKB, RT, GR, etc.) GL 3,314' KB 13.0' | | | | | |
| 18. Total Measured Depth of Well 3,850' | | 19. Plug Back Measured Depth 3,803' | | 20. Was Directional Survey Made? Inclination survey regularly taken | | 21. Type Electric and Other Logs Run Cement Bond, Comp. Neutron | | | | | |
| 22. Producing Interval(s), of this completion - Top, Bottom, Name Top of Yates (3023'), Top of 7-Rivers (3234'), Queen (3610') | | | | | | | | | | | |
| 23. CASING RECORD (Report all strings set in well) | | | | | | | | | | | |
| CASING SIZE | WEIGHT LB./FT. | DEPTH SET | | HOLE SIZE | | CEMENTING RECORD | | AMOUNT PULLED | | | |
| 8-5/8" | 24# | 1,223' | | 12-1/4" | | 399 sks | | 0 | | | |
| 5-1/2" | 15.5# | 3,850' | | 7-7/8" | | 740 sks | | 0 | | | |
| 24. LINER RECORD | | | | | | | | | | | |
| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN | | | 25. TUBING RECORD | | | | |
| None | | | | | | | SIZE | DEPTH SET | PACKER SET | | |
| | | | | | | | 2-7/8" | 3037' | 3033' | | |
| 26. Perforation record (interval, size, and number) 3718'-3728' @ 2 shots/foot (10 ft total, 20 shots) Langlie Mattix 3530'-3540' @ 2 spf (10 ft total, 20 shots) Langlie Mattix 3290'-3300' @ 2 spf (10 ft total, 20 shots) Jalmat 3102'-3112' @ 2 spf (10 ft total, 20 shots) Jalmat | | | | | | 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. | | | | | |
| | | | | | | DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED | | | | |
| | | | | | | 3718'-3728' | Acidize w/1000 gal 15% NEFE HCL | | | | |
| | | | | | | 3530'-3540' | Acidize w/1000 gal 15% HCL; Frac w/12# X-link + 102,408# 20/40 sand | | | | |
| | | | | | | 3290'-3300' | Acidize w/1000 gal 15% HCL; Frac w/12# X-link + 101,714# 20/40 sand | | | | |
| | | | | | | 3102'-3112' | Acidize w/1000 gal 15% HCL; Frac w/12# X-link + 123,497# 20/40 sand | | | | |
| 28. PRODUCTION | | | | | | | | | | | |
| Date First Production 5/24/14 | | Production Method (Flowing, gas lift, pumping - Size and type pump) Progressive Cavity Pump - PUMPING | | | | Well Status (Prod. or Shut-in) PRODUCING | | | | | |
| Date of Test 5/30/14 | Hours Tested 24 HRS | Choke Size | Prod'n For Test Period 24 HR | Oil - Bbl 10.0 | Gas - MCF 11.0 | Water - Bbl. 331.0 | Gas - Oil Ratio | | | | |
| Flow Tubing Press. 50 PSI | Casing Pressure 23 PSI | Calculated 24-Hour Rate | Oil - Bbl. 10.0 | Gas - MCF 11.0 | Water - Bbl. 331.0 | Oil Gravity - API - (Corr.) | | | | | |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.) SOLD | | | | | | 30. Test Witnessed By Dewayne Batchel/Manuel Soriano | | | | | |
| 31. List Attachments | | | | | | | | | | | |
| 32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. | | | | | | | | | | | |
| 33. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 1983 | | | | | | | | | | | |
| I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief | | | | | | | | | | | |
| Signature | Laura Pina | | Printed Name: | LAURA PINA | Title: | COMPLIANCE COORDINATOR | Date: | 03/03/2017 | | | |
| E-mail Address | | | | | | | | | | | |

