

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

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 229137	
		³ Reason for Filing Code/ Effective Date NW	
API Number 30-015-46671	⁵ Pool Name Purple Sage; Wolfcamp		⁶ Pool Code 98220
⁷ Property Code 323072	⁸ Property Name Hambone Federal Com		⁹ Well Number 706H

II. ¹⁰ Surface Location

Ul or lot no. K	Section 8	Township 26S	Range 29E	Lot Idn	Feet from the 1353	North/South Line South	Feet from the 1695	East/West line West	County Eddy
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¹¹ Bottom Hole Location

Ul or lot no. 4	Section 5	Township 26S	Range 29E	Lot Idn	Feet from the 201	North/South Line North	Feet from the 351	East/West line West	County Eddy
¹² Lse Code F	¹³ Producing Method Code F		¹⁴ Gas Connection Date 2/1/21		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
	ACC	O
298751	ETC	G
278421	Holly Refining and Marketing PO Box 159 Artesia, NM 88210	O

IV. Well Completion Data

²¹ Spud Date 2/6/20	²² Ready Date 1/25/21	²³ TD 18,882'	²⁴ PBTD 18,634'	²⁵ Perforations 10,160-18,618'	²⁶ DHC, MC
²⁷ Hole Size		²⁸ Casing & Tubing Size	²⁹ Depth Set		³⁰ Sacks Cement
17 1/2"		13 3/8"	368'		630
12 1/4"		10 3/4"	2,752'		505
8 3/4"		7 5/8"	9,335'		1075
6 3/4"		5 1/2"	18,858'		1425
		2 7/8"	9,450		

V. Well Test Data

³¹ Date New Oil 2/1/21	³² Gas Delivery Date 2/1/21	³³ Test Date 2/1/21	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 1800#	³⁶ Csg. Pressure 1750#
³⁷ Choke Size 15/64	³⁸ Oil 452	³⁹ Water 3203	⁴⁰ Gas 1411		⁴¹ Test Method Flowing
⁴² 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: <i>Amanda Avery</i>			OIL CONSERVATION DIVISION Approved by: KURT SIMMONS		
Printed name: Amanda Avery			Title: NM OCD, SANTA FE		
Title: Regulatory Analyst			Approval Date: 04/13/2021		
E-mail Address:					
Date: 3/29/21		Phone: 575-748-6962			

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 Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505				Form C-105 Revised April 3, 2017				
		1. WELL API NO.				30-015-46671				
		2. Type of Lease				<input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN				
		3. State Oil & Gas Lease No.								
WELL COMPLETION OR RECOMPLETION REPORT AND LOG										
4. Reason for filing:						5. Lease Name or Unit Agreement Name				
<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)						Hambone Federal Com				
7. Type of Completion:						6. Well Number:				
<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 _____						706H				
8. Name of Operator						9. OGRID				
COG Operating LLC						229137				
10. Address of Operator						11. Pool name or Wildcat				
2208 W. Main Street						Purple Sage; Wolfcamp (Gas)				
Artesia, NM 88210										
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	K	8	26S	29E		1353'	South	1695'	West	Eddy
BH:	4	5	26S	29E		201'	North	351'	West	Eddy
13. Date Spudded	14. Date T.D. Reached		15. Date Rig Released		16. Date Completed (Ready to Produce)			17. Elevations (DF and RKB, RT, GR, etc.)		
2/6/20	4/6/20		3/19/20		1/25/21			2895' GR		
18. Total Measured Depth of Well			19. Plug Back Measured Depth		20. Was Directional Survey Made?			21. Type Electric and Other Logs Run		
18,882'			18,634'		Yes					
22. Producing Interval(s), of this completion - Top, Bottom, Name										
10,160-18,618' Wolfcamp										
23. CASING RECORD (Report all strings set in well)										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13 3/8"		54.5#		368'		17 1/2"		620 sx		
10 3/4"		45.5#		2752'		12 1/4"		650 sx		
7 5/8"		23#		9335'		8 3/4"		1681 sx		
5 1/2"		20#		18858'		6 3/4"		1400 sx		
24. LINER RECORD										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN		25. TUBING RECORD				
						SIZE	DEPTH SET	PACKER SET		
						2 7/8"	9450'	9440'		
26. Perforation record (interval, size, and number)						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
10,160-18,618' (864)						DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED		
						10,160-18,618'		Acidz w/0 gal 7 1/2%; Frac w/21,328,660# sand & 21,700,770 gal fluid		
28. PRODUCTION										
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)				
2/1/21		Flowing				Producing				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio			
2/1/21	24	15/64"		452	1411	3203				
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)				
1800#	1750#		452	1411	3203					
29. Disposition of Gas (Sold, used for fuel, vented, etc.)						30. Test Witnessed By				
Sold						Jace Farmer				
31. List Attachments										
Surveys										
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.						33. Rig Release Date:				
						3/19/20				
34. If an on-site burial was used at the well, report the exact location of the on-site burial:										
Latitude _____ Longitude _____ NAD83										
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										
Printed										
Signature <i>Amanda Avery</i>		Name: Amanda Avery		Title Regulatory Analyst		Date: 3/29/21				
E-mail Address: amanda.l.avery@conocophillips.com										

District I
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District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
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Santa Fe, NM 87505

CONDITIONS

Action 22329

CONDITIONS OF APPROVAL

Operator:	COG OPERATING LLC	600 W Illinois Ave	Midland, TX79701	OGRID:	229137	Action Number:	22329	Action Type:	C-104C
OCD Reviewer									Condition
ksimmons									None