

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] **TYPE OF APPLICATION** - Check Those Which Apply for [A] NSL 7490
 [A] Location - Spacing Unit - Simultaneous Dedication COG Operating LLC (229137)
 NSL NSP SD Mas Federal #4H 30-025-pending
Berry; Bone Spring, North (5535)
 Check One Only for [B] or [C]
 [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM
 [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR
 [D] Other: Specify _____

[2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply
 [A] Working, Royalty or Overriding Royalty Interest Owners
 [B] Offset Operators, Leaseholders or Surface Owner
 [C] Application is One Which Requires Published Legal Notice
 [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
 [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
 [F] Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Debra L. Willbourn Debra L. Willbourn Regulatory Analyst 10/7/16
 Print or Type Name Signature Title Date
dwilbourn@concho.com
e-mail Address



October 7, 2016

Oil Conservation Division
Attention: Mr. Leonard Lowe
1220 South Saint Francis Drive
Santa Fe, New Mexico 87505

Re: **Mas Federal #4H**
SHL: 190' FNL 2440' FWL (Unit C), Section 34-T20S-R34E
Proposed First Perf: 330' FNL 1980' FWL, Sec. 34-T20S-R34E
BHL: 50' FSL 1980' FWL (Unit N), Section 34-T20S-R34E
Proposed Last Perf: 100' FSL 1980' FWL, Sec. 34-T20S-R34E
Lea County, New Mexico

Dear Mr. Lowe:

Pursuant to Division Rule 19.15.15.13, COG Operating LLC (COG) respectfully requests administrative approval of an unorthodox oil well location for its Mas Federal #4H well. The producing interval of this well does not meet the 330' from the outer boundary of the producing area requirement. Attached is a Form C-102 showing the project area and the producing area of this well.

COG is seeking approval of the unorthodox location in order to maximize recovery of reserves. The New Mexico Oil Conservation Division's approval of the unorthodox completed interval for the Mas Federal #4H well will allow for efficient recovery of reserves thereby preventing waste and improving well performance.

The affected offset tract is Lot 4 of Section 2-T21S-R33E. COG Operating, LLC is the designated operator of this tract. A notice letter of this application has been sent by certified mail this date to all working interest owners under said offset tract. The notice letter advises the working interest owners that in the event they have an objection to COG's application, they must file a written letter of objection with the Division within twenty (20) days from the date the Division received this application.

Thank you for your consideration of this application. Should you have questions or require further information, please contact me at 575-748-6958 or by email at dwilbourn@concho.com.

Sincerely,

A handwritten signature in cursive script that reads "Debora L. Wilbourn".

Debora L. Wilbourn
Regulatory Analyst

Enclosure
cc: OCD Artesia

CORPORATE ADDRESS

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND, TEXAS 79701
P 432.683.7443 | F 432.683.7441

ARTESIA WEST OFFICE

2208 MAIN STREET | ARTESIA, NEW MEXICO 88210
P 575.748.6940 | F 575.746.2096

DISTRICT I
1845 W. TROVATO DR., EDGEMO, NM 88240
Phone: (505) 352-8181 Fax: (505) 352-8720

DISTRICT II
511 S. FIRST ST., ARTESIA, NM 88210
Phone: (505) 748-1253 Fax: (505) 748-8720

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (505) 334-8178 Fax: (505) 334-8170

DISTRICT IV
1250 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 476-3400 Fax: (505) 476-3482

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
	5535	Berry; Bone Spring, North
Property Code	Property Name	Well Number
315664	MAS FEDERAL	4H
GRID No.	Operator Name	Elevation
229137	COG OPERATING, LLC	3719.5'

Surface Location

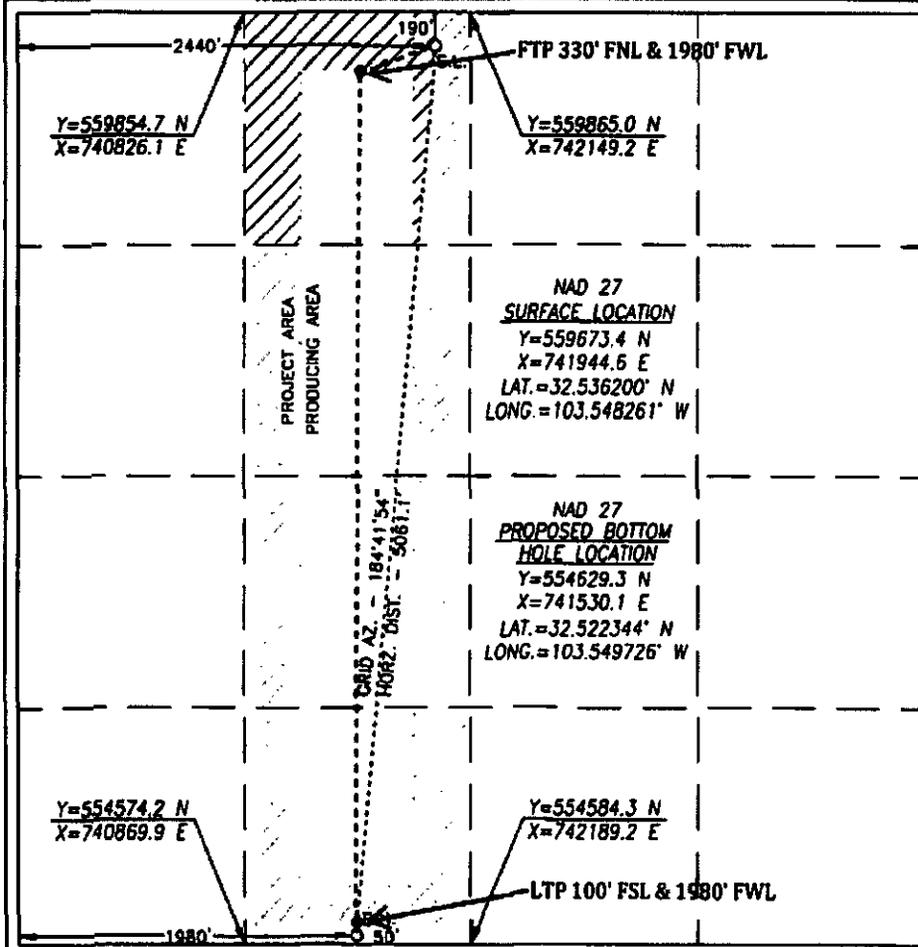
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	34	20-S	34-E		190	NORTH	2440	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	34	20-S	34-E		50	SOUTH	1980	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
160			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION
I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unless mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Debora L. Willbourn
Signature Date 10/7/16

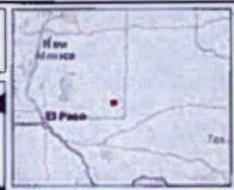
Debora L. Willbourn
Printed Name
dwillbourn@concho.com
E-mail Address

SURVEYOR CERTIFICATION
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

SEPTEMBER 9, 2016
Date of Survey

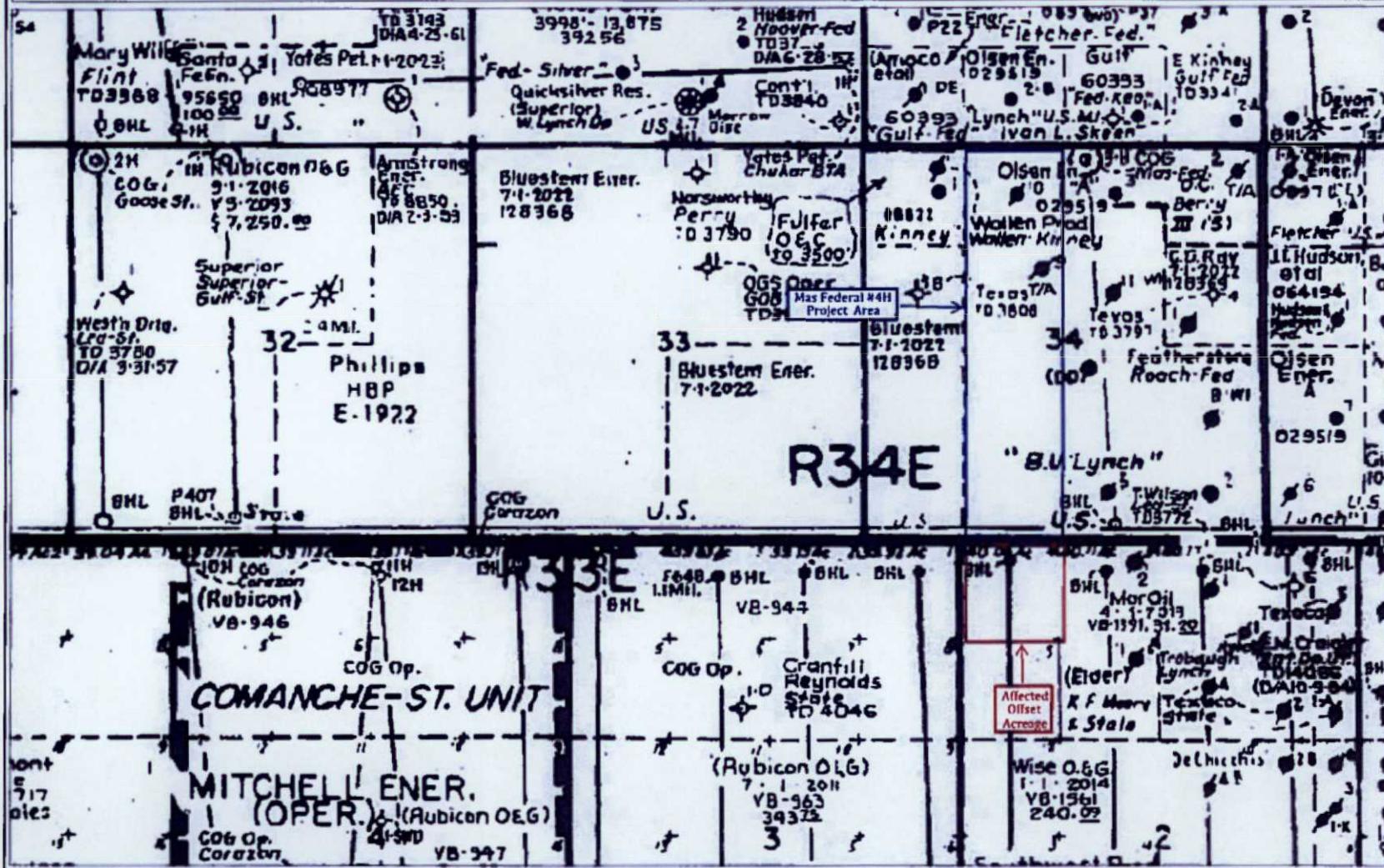
Signature & Seal of Professional Surveyor

Chad L. Marcrow
9/13/16
Certificate No. CHAD MARCROW 17777
W.O. #16-704 DRAWN BY: JR



Legend

Map Scale 1:18,055



Mas Federal #4H
Application for Non Standard Location
Notification List

<i>Date Sent</i>	<i>Initials</i>	<i>Sent Certified Return Receipt to:</i>	<i>Receipt No.</i>	<i>Rec'd</i>
10/07/16	DLW	Gamble Production, 500 West Texas Ave., Suite 600, Midland, TX 79701	7016 0910 0000 2654 6054	
10/07/16	DLW	Hoffmann Partnership LTD, 265 Saint Marks Path, Kerrville, TX 78028	7013 3020 0000 8749 9184	
10/07/16	DLW	Petro-Quest Oil & Gas LP, P. O. Box 294151, Kerrville, TX 78029	7013 3020 0000 8749 9191	

Mailed 10/7/16
Debora L. Wilbourn



October 7, 2016

Gamble Production
500 West Texas Ave., Suite 600
Midland, TX 79701

Re: Application for Unorthodox Well Location
Mas Federal #4H

SHL: 190' FNL 2440' FWL (Unit C), Section 34-T20S-R34E
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BHL: 50' FSL 1980' FWL (Unit N), Section 34-T20S-R34E
Proposed Last Perf: 100' FSL 1980' FWL, Sec. 34-T20S-R34E
Lea County, New Mexico

Gentlemen:

Attached is a copy of COG Operating LLC (COG)'s Application for Unorthodox Well Location for the Mas Federal #4H well, the SHL of which is located in Section 34-T20S-R34E, Lea County, New Mexico. You are being sent a copy of this Application per OCD's requirement to notify the working interest owners of the offset affected acreage. If you have any objection to this Application, notification should be given to OCD within 20 days of receipt of this letter.

COG is seeking approval of the unorthodox location in order to allow for the efficient recovery of reserves thereby preventing waste.

If you have any questions regarding this letter, please contact
Greg Geist at 432-221-0452 or t

Sincerely,

Debora L. Wilbourn
Debora L. Wilbourn
Regulatory Analyst

Enclosure

CORPORATE ADDRESS

ONE CONCHO CENTER | 500 WEST ILLINOIS AVE
P:432.663.7443 | F:432.663.7441

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

GAMBLE PRODUCTION
500 WEST TEXAS AVE STE 600
MIDLAND TX 79701

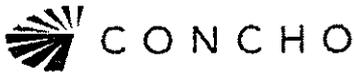
City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7539 02 000-0017 See Reverse for instructions

509 692 2654 6054
7016 0910 0000 2654 6054

10/7/16

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>10-11</u></p> <p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p>	
<p>1. Article Addressed to:</p> <p>GAMBLE PRODUCTION 500 WEST TEXAS AVE STE 600 MIDLAND TX 79701</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>	
<p>2. Article Number (transfer from service label) <u>Mas 4H - NSL</u></p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	



October 7, 2016

Hoffmann Partnership LTD
265 Saint Marks Path
Kerrville, TX 78028

Re: Application for Unorthodox Well Location
Mas Federal #4H
SHL: 190' FNL 2440' FWL (Unit C), Section 34-T20S-R34E
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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

10/11/16

HOFFMANN PARTNERSHIP LTD
265 SAINT MARKS PATH
KERRVILLE TX 78028

PS Form 3820, August 2009 See Reverse for Instructions

Cel

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

HOFFMANN PARTNERSHIP LTD
265 SAINT MARKS PATH
KERRVILLE TX 78028

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Signature] Agent Addressee

B. Received by (Printed Name) *MARK HOFFMAN* C. Date of Delivery *10/12/16*

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

any Kidwell at 432-685-2535 or st@concho.com.

Mas 44-NSL

2. Article Number (Transfer from service label) **7013 3020 0000 8745 9184**

POST OFFICE
STREET | ARTESIA, NEW MEXICO 88210
40 | F 575.746.2096

