

District I - (505) 393-6161

1625 N. French Dr.

Hobbs, NM 88240

District II - (505) 748-1283

811 S. First

Artesia, NM 88210

District III - (505) 334-6179

1000 Rio Brazos Road

Aztec, NM 87410

District IV - (505) 827-7131

2040 S. Pacheco

Santa Fe, NM 87505

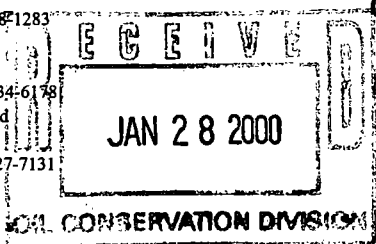
Energy Minerals and Natural Resources Department

Oil Conservation Division

2040 South Pacheco Street

Santa Fe, New Mexico 87505

(505) 827-7131

SUBMIT ORIGINAL
PLUS 2 COPIES
TO THE SANTA FE
OFFICE

APPLICATION FOR NEW WELL STATUS

I. Operator and Well

Operator name & address CONCHO RESOURCES INC. 110 W. LOUISIANA STE 410 MIDLAND, TX 79701							OGRID Number 166111	
Contact Party Terri Stathem							Phone 915-683-7443	
Property Name West Shugart '19' Federal						Well Number 1		API Number 30015-30797
UL	Section	Township	Range	Feet From The	North/South Line	Feet From The	East/West Line	County
E	19	18S	31E	2310	NORTH	990	WEST	Eddy

II. Date/Time Information

Spud Date 12/3/99	Spud Time 4:45 PM MST	Date Completed 1/5/00	Pool Shugart Bone Spring North
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III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.

IV. Attach a list of all working interest owners with their percentage interests.

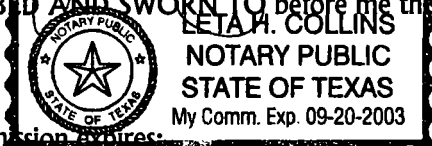
V. AFFIDAVIT:

State of TEXAS)

ss.

County of MIDLAND)JOE WRIGHT, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced well.
- To the best of my knowledge, this application is complete and correct.

Signature *Joe Wright* Title ENGINEER Date 1/26/00SUBSCRIBED AND SWORN TO before me this 26th day of January, 2000.

My Commission Expires

Notary Public

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

Signature <u><i>Mark Bailey</i></u>	Title <u>P.F. Spec.</u>	Date <u>MAR 06 2000</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: 3/6/00**NOTICE: The operator must notify all working interest owners of this New Well certification.**

PV2V2010849876

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC 029387 B
2. Name of Operator CONCHO RESOURCES INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 110 W. LOUISIANA STE 410; MIDLAND, TX 79701 (915) 683-7443	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2310' Fnl & 990' FWL, SEC. 19, 18S, 31E.	8. Well Name and No. West Shugart '19' Federal #1
	9. API Well No. 30015-30797
	10. Field and Pool, or Exploratory Area Shugart Bone Spring North
	11. County or Parish, State EDDY, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

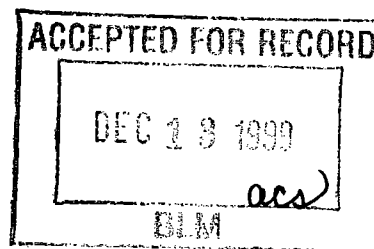
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>spud & set csg</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

12-3-99 Spud well @ 4:45 PM MST.

12-5-99 RIH w/ 13-3/8" csg & set @ 863' w/ lead cmt: 300 sx 15/85 POZ C + 2% CaCl + 2% SI + 1/4 PPS Celloflake + 5 PPS salt followed by tail cmt: 700 sx of 15/85 POZ C + 2% CaCl + 2% SI + 1/4 PPS Celloflake.
Did not circ. Used additional 400 sx of same type cmt to circ cmt to surface.



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

Signed [Signature] Title Production Analyst Date 12/07/99
(This space for Federal or State office use)
Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

Title 18 U.S.C. Section 1001, makes 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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

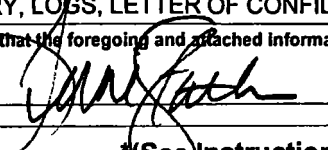
1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR CONCHO RESOURCES INC.						5. LEASE DESIGNATION AND SERIAL NO. LC029387 B	
3. ADDRESS AND TELEPHONE NO. 110 W LOUISIANA STE 410; MIDLAND TX 79701						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2310' FNL & 990' FWL At top prod. interval reported below SAME At total depth SAME						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
12. COUNTY OR PARISH Eddy						13. STATE NM	
15. DATE SPUDDED 12/03/99		16. DATE T.D. REACHED 12/20/99		17. DATE COMPL. (Ready to prod.) 01/05/00		18. ELEVATIONS (DF, RKB, RT, GE, ETC.)* 3641 GE	
19. ELEV. CASINGHEAD 3642'		20. TOTAL DEPTH, MD & TVD 8409		21. PLUG, BACK T.D., MD & TVD 8345		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		ROTARY TOOLS XX		CABLE TOOLS		24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)* 8190-8230 BONE SPRING	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CNL/DLL GR/CBL		27. WAS WELL CORED No			

CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13-3/8	48	863	17-1/2	1400 SX C - CIRC TO SURF	0
8-5/8	32	2836	11	1000 SX C - CIRC TO SURF	0
5-1/2	17	8409	7-7/8	1100 SX C - TOC @ 1406'	0

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8	8298	
31. PERFORATION RECORD (Interval, size and number) 8190-8230' 2 SPF - 81 HOLES TOTAL					32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED		
8190-8230					4000 GALS NEFE ACID		

33. * PRODUCTION							
DATE FIRST PRODUCTION 01/05/00		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) PUMPING 2-1/2"X1-1/2"X24' RHBC				WELL STATUS (Producing or shut-in) PROD	
DATE OF TEST 01/24/00	HOURS TESTED 24	CHOKE SIZE OPEN	PROD'N FOR TEST PERIOD →	OIL—BBL. 185	GAS—MCF. 156	WATER—BBL. 8	GAS-OIL RATIO 1185
FLOW. TUBING PRESS.	CASING PRESSURE 60	CALCULATED 24-HOUR RATE →	OIL—BBL. 185	GAS—MCF. 156	WATER—BBL. 8	OIL GRAVITY-API (CORR.) 39.4	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) SOLD						TEST WITNESSED BY M. HULSE	

35. LIST OF ATTACHMENTS SUNDRY, LOGS, LETTER OF CONFIDENTIALITY		
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		
SIGNED	TITLE	DATE
	PRODUCTION ANALYST	01/26/00

* (See Instructions and Spaces for Additional Data on Reverse Side)

37. SUMMARY OF POROUS ZONES: (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):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
RED BED	SURF	370	
RED BED & ANHY	370	1813	
SALT & ANHY	1813	2775	
DOL & SS	2775	5900	
LS & SS	5900	TD	

38. GEOLOGICAL MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
PREMIER	3872	
DELAWARE	4020	
BONE SPRING	5900	

38. GEOLOGICAL MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC 029387 B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

West Shugart '19' Federal #1

9. API Well No.

30015-30797

10. Field and Pool, or Exploratory Area

Shugart Bone Spring North

11. County or Parish, State

EDDY, NM

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SUBMIT IN TRIPLICATE

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☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

CONCHO RESOURCES INC.

3. Address and Telephone No.

110 W. LOUISIANA STE 410; MIDLAND, TX 79701 (915) 683-7443

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

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12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other COMPLETION

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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12-5-99 RIH w/ 13-3/8" csg & set @ 863' w/ 1400 sx POZ C. CIRC TO SURF.

12-9-99 RIH W/ 8-5/8" CSG & SET @ 2836' W/ 1000 SX C. CIRC. 129 SX TO PIT.

12-20-99 RIH W/ 5-1/2" CSG & SET @ 8409' W/ 1100 SX C. TOC @ 1406'.

RELEASE RIG @ 10:45 AM MST.

12-27-99 PERF WELL W/ 2 SPF @ 8190-8230' (81 HOLES).

12-29-99 MIRU PU. PU 2-7/8" TBG & TIH TO 2181'. SET PKR @ 8276'.

12-30-99 SPOT 1.5 BBLS 15% NEFE ACID ACROSS PERFS. SET PKR @ 8091'. ACID BONE SPRING W/ 4000 GALS NEFE ACID. RD. RU SWAB.

1-4-00 MIRU PU. RU SWAB. TURN TO SALES.

1-5-00 TEST 267 BO, 6 BW. 99 MCF.

1-8-00 WELL DIED.

1-10-00 REL PKR. TOH. TIH W/ PROD TBG.

1-11-00 RIH W/ PUMP AND RODS. RDMO.

1-12-00 SET PUMPING UNIT.

1-13-00 INSTALLED GENERATOR & STARTED WELL.

1-24-00 IP @ 185 BO, 156 MCF, 8 BW.

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

Signed

Title Production Analyst

Date 01/25/00

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

CONCHO RESOURCES INC.

WEST SHUGART '19' FEDERAL NO. 1

WORKING INTEREST OWNERS:

S & P Co.	11.25%
Concho Resources Inc.	88.75%