Submit within 45 days of well com	pletion	State	State of New Mexico			Revised February 15, 2012													
						1. WELL API NO.													
	Energy, Minerals and Natural Resources						30-025-40874												
Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505						Well Name: GETTYSBURG STATE #002H Well Number: 002H													
										HYDRAULIC FRACTURING FLUID DISCLOSURE						4. Surface Hole Location: Unit: C Lot: C Section: 16 Township: 23S Range: 34E Feet from: 330 N/S Line: N Feet from: 1980 EW Line: W			
										⊠ Original						5. Bottom Hole Location:			
										□Amendment						Unit:F Lot: Section:21 Township:23S Range:34E			
-Americane it						Feet from: 2311 N/S Line: N Feet from: 2059 E/W Line: W													
						6. latitude: longitude:													
						32.3110037087757 -													
						103.477106451815 7. County:													
						Lea													
8. Operator Name and Address:	0.05				9. OGRID:	229137	10. Phone Numb	ber:	432-685-4332										
COG OPERATING LL One Concho Center 600 W. Illinois Ave Midland 79701 11. Last Fracture Date: 4/26/20		l bv: Baker Hughes			12. Productio	on Type:													
0						Name of the second													
						actured Interval: 0,484 ft to 17,414 ft													
						0,494 ft to 17,414 ft olume of Fluid Pumped: 17 gals													
17. HYDRAULIC FLUID C	OMPOSITION	AND CONCENTRA	TION:																
Trade Name S	upplier	Purpose	Ingredients	(CAS #) Chemic Service #	al Abstract	Maximum Ingredient Concentration in Additive (% by mass)		Maximum In Concentration mass)	gredient on in HF Fluid (% by										
Parasorb 5000, bag	laker Hughes	Paraffin Inhibitor	Calcined Diatomaceous Earth			65%			27.1285476%										
			Proprietary Paraffin Inhibitor	Trade Secret	14808-60-7		25%		10.4340568%										
			Silica, Crystalline- Quartz				5%		2.0868114%										
Scaletrol 720, 330 gl tote E	laker Hughes			8042-47-5 10043-52-4		30% 5%			12.5208681% 2.2775831%										
Scalettol 720, 330 gl tote	aker Hugnes	Scale inflibitor	Ethylene Glycol	10043-52-4		30%			13.6654983%										
18. I, as Operator, hereby certify that the information shown on this disclosure form is true and complete					edge and belie	ef.	30 %		13.003430370										
Signature: Signed Electronically Printed Name: Kacie Connally						Title: Permittin	g Tech	3											
Date: 10/15/2013	- 41 11 11 11		111.2.5				177100000												
E-mail Address: kconnally@d	concho.com																		

NMOCD does not require the reporting of information beyond MSDS data as described in 29 CFR 1910.1200. NMOCD does not require the reporting or disclosure of proprietary, trade secret or confidential business information.