

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		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>		<b>Form C-105</b> Revised April 3, 2017	
		1. WELL API NO. <b>30-025-42545</b>		2. Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN	
		3. State Oil & Gas Lease No. <b>NM 33955</b>		5. Lease Name or Unit Agreement Name <b>Halfway SWD Federal</b>	
				6. Well Number: <b>001</b>	
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>					
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (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)					
7. Type of Completion: <input type="checkbox"/> NEW WELL <input checked="" type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input checked="" type="checkbox"/> OTHER <b>Alter and Replace Tubing and Packer</b>					
8. Name of Operator <b>R360 Permian Basin, LLC</b>				9. OGRID <b>289936</b>	
10. Address of Operator <b>4507 Carlsbad Highway, Hobbs, NM 88240</b>				11. Pool name or Wildcat <b>SWD; Devonian</b>	
12. Location	Unit Ltr	Section	Township	Range	Lot
Surface:	M	22	22S	32E	
BH:					
13. Date Spudded <b>07/01/15</b>	14. Date T.D. Reached <b>10/04/15</b>	15. Date Rig Released <b>10/07/15</b>	16. Date Completed (Ready to Produce) <b>11/15/15</b>		17. Elevations (DF and RKB, RT, GR, etc.) <b>3533 GR</b>
18. Total Measured Depth of Well <b>16,000</b>		19. Plug Back Measured Depth	20. Was Directional Survey Made? <b>Yes</b>		21. Type Electric and Other Logs Run <b>Quad Combo; Dipole Sonic</b>
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>SWD; 14,543-16,000; Devonian</b>					
<b>23. CASING RECORD (Report all strings set in well)</b>					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
20	106.4	1080	24	2475 sx class C; 0-1080'	
13.375	68	2902	17.5	1662 sx Class C; 0-2902'	
9.625	47	4992	12.25	1395 sx class C; 0-4992'	
7	35	14635	8.5	635 sx class C; 0-14635'	
<b>24. LINER RECORD</b>					
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	
<b>25. TUBING RECORD</b>					
SIZE	DEPTH SET	PACKER SET			
4.5	14563	14563			
26. Perforation record (interval, size, and number) <b>Open Hole Completion; 14,635-16,009</b>			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.		
			DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	
<b>28. PRODUCTION</b>					
Date First Production		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> )		Well Status ( <i>Prod. or Shut-in</i> )	
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> )					30. Test Witnessed By <b>07/31/19; David Polefko</b>
31. List Attachments					
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.					33. Rig Release Date: <b>07/31/19</b>
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					
Signature <b>Greg Trahan</b>		Printed Name <b>Greg Trahan</b>		Title <b>SWD + Technical Service MANAGER</b>	
E-mail Address <b>gtrahan@r360es.com</b>				Date <b>9-10-19</b>	

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock	T. Ellenburger	Base Greenhorn	T.Granite
T. Blinebry	T. Gr. Wash	T. Dakota	
T.Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T.Todilto	
T. Abo	T.	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 3, from.....to.....

No. 2, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology