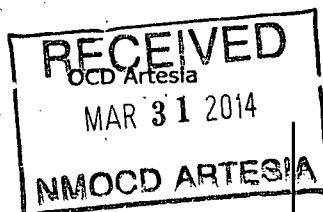


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NNMM94593	
b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator COG OPERATING LLC		Contact: KANICIA CARRILLO E-Mail: kcastillo@concho.com	
3. Address ONE CONCHO CENTER 600 WILLINOIS AVENUE MIDLAND, TX 79701		3a. Phone No. (include area code) Ph: 432-685-4332	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NWSW 1770FSL 990FWL At top prod interval reported below NWSW 1770FSL 990FWL At total depth NWSW 1770FSL 990FWL		8. Lease Name and Well No. FIR FEDERAL 1	
14. Date Spudded 12/03/2001		15. Date T.D. Reached 12/28/2001	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 12/31/2013		9. API Well No. 30-015-32069-00-S2	
18. Total Depth: MD 7208 TVD 7208		19. Plug Back T.D.: MD 6215 TVD 6215	
20. Depth Bridge Plug Set: MD TVD		10. Field and Pool, or Exploratory RED LAKE	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR		11. Sec., T., R., M., or Block and Survey or Area Sec 25 T17S R27E Mer NMP	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)		12. County or Parish EDDY	
23. Casing and Liner Record (Report all strings set in well)		13. State NM	
24. Tubing Record		17. Elevations (DF, KB, RT, GL)* 3606 KB	

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12.250	8.625 J-55	24.0	0	415		425		0	
7.875	5.500 J-55	17.0	0	7199		1790		0	

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	4651							

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) YESO	3230	4500	3230 TO 3480	0.410	26	OPEN
B)			3680 TO 3905	0.410	26	OPEN
C)			3965 TO 4190	0.410	26	OPEN
D)			4250 TO 4500	0.410	26	OPEN

Depth Interval	Amount and Type of Material
3230 TO 3905	FRAC W/ 235,969 GALS GEL, 266,625# 20/40 WHITE SAND, 62,851# 16/30 SLC.
3230 TO 3905	ACIDIZED W/ 6,000 GALS 15% ACID.
3965 TO 4500	ACIDIZE W/ 7,010 GALS 15% ACID.
3965 TO 4500	FRAC W/ 241,358 GALS GEL, 294,892# 20/40 WHITE SAND, 55,676# 16/30 SLC.

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
01/03/2014	01/14/2014	24	→	93.0	20.0	240.0	41.1	0.60	Electric Pumping Unit
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
N/A	SI	70.0	→	93	20	240	215	POW	

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #232871 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

Accepted for record  
NMOCD

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
SOLD

## 30. Summary of Porous Zones (Include Aquifers):

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.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
SEVEN RIVERS QUEEN SAN ANDRES GLORIETA TUBB WOLFCAMP	444 1224 1757 3090 4614 6902	7046		SEVEN RIVERS QUEEN SAN ANDRES GLORIETA TUBB ABO WOLFCAMP	444 1224 1757 3090 4614 5240 6380

## 32. Additional remarks (include plugging procedure):

## 33. Circle enclosed attachments:

- |   |                    |               |                       |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.)     | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis   | 7 Other:      |                       |

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #232871 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by JAMES AMOS on 03/26/2014 (14JA0887SE)

Name (please print) KANICIA CARRILLOTitle PREPARERSignature (Electronic Submission)Date 01/22/2014

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\*

**District I**

1625 N. French Dr., Hobbs, NM 88240

**District II**

1301 W. Grand Avenue, 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 &amp; Natural Resources Department

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised June 10, 2003

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number <b>30-015-32069</b>	<sup>2</sup> Pool Code <b>96836</b>	<sup>3</sup> Pool Name <b>Red Lake; Glorieta Yeso-Northeast</b>
<sup>4</sup> Property Code <b>302494</b>	<sup>5</sup> Property Name <b>Fir Federal</b>	<sup>6</sup> Well Number <b>1</b>
<sup>7</sup> OGRID No. <b>229137</b>	<sup>8</sup> Operator Name <b>COG OPERATING LLC</b>	<sup>9</sup> Elevation <b>3599.5</b>

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<b>L</b>	<b>25</b>	<b>17S</b>	<b>27E</b>		<b>1770</b>	<b>South</b>	<b>990</b>	<b>West</b>	<b>Eddy</b>

<sup>11</sup> 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

<sup>12</sup> Dedicated Acres <b>40</b>	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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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

	<sup>17</sup> <b>OPERATOR CERTIFICATION</b> <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i>
	Signature <b>Kánicia Castillo</b> Printed Name <b>Lead Regulatory Analyst</b> Title and E-mail Address <b>1/23/14</b> Date
	<sup>18</sup> <b>SURVEYOR CERTIFICATION</b> <i>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.</i>
	Referred Original Plat Date of Survey Signature and Seal of Professional Surveyor:  Certificate Number