

NM OIL CONSERVATION
ARTESIA DISTRICT

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| Subm. To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88249 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 | State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 | Form C-105 Revised August 1, 2011 |
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 ARTESIA DISTRICT
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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

| | |
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| 4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (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) | 5. Lease Name or Unit Agreement Name MYOX 19 State 6. Well Number: 3H |
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7. Type of Completion:
 NEW WELL
 WORKOVER
 DEEPENING
 PLUGBACK
 DIFFERENT RESERVOIR
 OTHER

| | |
|--|--------------------|
| 8. Name of Operator COG Operating LLC | 9. OGRID 229137 |
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|---|--|
| 10. Address of Operator 2208 W. Main Street Artesia, NM 88210 | 11. Pool name or Wildcat Hay Hollow; Bone Spring, North |
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| 12. Location | Unit Ltr | Section | Township | Range | Lot | Feet from the | N/S Line | Feet from the | E/W Line | County |
|--------------|----------|---------|----------|-------|-----|---------------|----------|---------------|----------|--------|
| Surface: | O | 19 | 25S | 28E | | 190 | South | 2290 | East | Eddy |
| BH: | B | 19 | 25S | 28E | | 363 | North | 2015 | East | Eddy |

| | | | | |
|-----------------------------|----------------------------------|----------------------------------|--|---|
| 13. Date Spudded 7/23/14 | 14. Date T.D. Reached 8/11/14 | 15. Date Rig Released 8/14/14 | 16. Date Completed (Ready to Produce) 9/14/14 | 17. Elevations (DF and RKB, RT, GR, etc.) 2996' GR |
|-----------------------------|----------------------------------|----------------------------------|--|---|

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| 18. Total Measured Depth 12279' | 19. Plug Back Measured Depth 12130' | 20. Was Directional Survey Made? Yes | 21. Type Electric and Other Logs Run None |
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22. Producing Interval(s), of this completion - Top, Bottom, Name
8116-12105' Bone Spring

23. CASING RECORD (Report all strings set in well)

| CASING SIZE | WEIGHT LB./FT. | DEPTH SET | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|----------------|-----------|-----------|------------------|---------------|
| 13 3/8" | 48# | 352' | 17 1/2" | 400 sx | 0 |
| 9 5/8" | 36# | 2305' | 12 1/4" | 950 sx | 0 |
| 5 1/2" | 17# | 12256' | 7 7/8" | 2200 sx | 0 |

| 24. LINER RECORD | | | | 25. TUBING RECORD | | | |
|------------------|-----|--------|--------------|-------------------|--------|-----------|------------|
| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN | SIZE | DEPTH SET | PACKER SET |
| | | | | | 2 7/8" | 8080' | 7254' |

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| 26. Perforation record (interval, size, and number) 8116-12105' (504) | 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. | |
| | DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED |
| | 8116-12105' | Acidz w/81132 gal 7 1/2%; Frac w/6417283# sand & 5517165 gal fluid |

28. PRODUCTION

| | | | | | | | |
|-----------------------------------|--------------------|--|------------------------|-------------------|---|-----------------------------|-----------------|
| Date First Production 10/17/14 | | Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing | | | Well Status (Prod. or Shut-in) Producing | | |
| Date of Test 10/19/14 | Hours Tested 24 | Choke Size | Prod'n For Test Period | Oil - Bbl 615 | Gas - MCF 1128 | Water - Bbl. 1790 | Gas - Oil Ratio |
| Flow Tubing Press. 600# | Casing Pressure | Calculated 24-Hour Rate | Oil - Bbl. 615 | Gas - MCF 1128 | Water - Bbl. 1790 | Oil Gravity - API - (Corr.) | |

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| 29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold | 30. Test Witnessed By Tyler Deans |
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31. List Attachments
Surveys

32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.

33. If an on-site burial was used at the well, report the exact location of the on-site burial:

Latitude _____ Longitude _____ NAD 1927 1983

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 | Printed Name: Stormi Davis | Title Regulatory Analyst | Date: 10/22/14 |
|-----------|----------------------------|--------------------------|----------------|

E-mail Address: sdavis@concho.com

