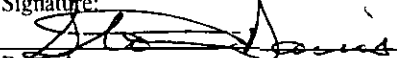





| | | | | | |
|---|---------------------------------|-----------------------------------|---|---|--------------------------------------|
| ³¹ Date New Oil 1/27/16 | ³² Gas Delivery Date | ³³ Test Date 2/2/16 | ³⁴ Test Length 24 Hrs | ³⁵ Tbg. Pressure 2482# | ³⁶ Csg. Pressure |
| ³⁷ Choke Size 16/64" | ³⁸ Oil 242 | ³⁹ Water 1668 | ⁴⁰ Gas 679 | | ⁴¹ Test Method Flowing |
| ⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature:  | | | OIL CONSERVATION DIVISION | | |
| Printed name: Stormi Davis | | | Approved by:  | | |
| Title: Regulatory Analyst | | | Title:  | | |
| E-mail Address: sdavis@concho.com | | | Approval Date: 2/11/16 | | |
| Date: 2/8/16 | | Phone: 575-748-6946 | | Pending BLM approvals will subsequently be reviewed and scanned  | |

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

| | | |
|--|---|--|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. NMNM120895 |
| 2. Name of Operator COG PRODUCTION LLC | | 6. If Indian, Allottee or Tribe Name |
| Contact: STORMI DAVIS E-Mail: sdavis@concho.com | | 7. If Unit or CA/Agreement, Name and/or No. |
| 3a. Address 2208 WEST MAIN ARTESIA, NM 88210 | 3b. Phone No. (include area code) Ph: 575-748-6946 | 8. Well Name and No. PATRON 23 FEDERAL 4H |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T25S R29E Mer NMP NENE 190FNL 660FEL | | 9. API Well No. 30-015-42451 |
| | | 10. Field and Pool, or Exploratory WILDCAT; UP WOLFCAMP |
| | | 11. County or Parish, and State EDDY COUNTY, NM |

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

| TYPE OF SUBMISSION | TYPE OF ACTION | | | | |
|---|---|---|--|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off | |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity | |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other | |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | | |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

10/23/15 to 11/2/15 MIRU. Test 7" x 4 1/2 to 8500# for 15 mins. Good test. Test 7" x 9 5/8" to 1500# for 15 mins. Good TIH to TOL & circ clean. Test csg to 8500# for 15 mins. Good test. Perforate 14746-14756' (60) & perform injection test.

1/6/16 to 1/16/16 Set CBP @ 14710'. Test csg to 8154#. Perforate Wolfcamp 10966-14696' (828). Acdz w/70140 gal 15%; frac w/6744668# sand & 7517874 gal fluid.

1/18/16 Drilled out all frac plugs. Clean down to CBP @ 14710'.

1/19/16 to 1/21/16 Set 2 7/8" 6.5# L-80 tbg @ 9821' & pkr @ 9804'. Installed gas-lift system.

1/25/16 Began flowing back & testing.

NM OIL CONSERVATION
ARTESIA DISTRICT

FEB 10 2016

RECEIVED

| | |
|---|-----------------|
| 14. I hereby certify that the foregoing is true and correct. Electronic Submission #330964 verified by the BLM Well Information System For COG PRODUCTION LLC, sent to the Carlsbad | |
| Name (Printed/Typed) STORMI DAVIS | Title PREPARER |
| Signature (Electronic Submission) | Date 02/08/2016 |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

| | |
|---|--------------|
| Approved By _____ | Title _____ |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. | Office _____ |

Pending BLM approvals will
subsequently be reviewed
and scanned

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Department of agency of the United

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #330964 that would not fit on the form

32. Additional remarks, continued

1/26/16 Date of 1st production.

NM OIL CONSERVATION ARTESIA DISTRICT

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FEB 10 2016

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM120895

| | | | | | |
|---|--|---|--|--|--|
| 1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other | | | 6. If Indian, Allottee or Tribe Name | | |
| b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____ | | | 7. Unit or CA Agreement Name and No. | | |
| 2. Name of Operator COG PRODUCTION LLC | | | 8. Lease Name and Well No. PATRON 23 FEDERAL 4H | | |
| 3. Address 2208 WEST MAIN ARTESIA, NM 88210 | | | 9. API Well No. 30-015-42451 | | |
| 4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 23 T25S R29E Mer At surface NENE 190FNL 660FEL At top prod interval reported below Sec 23 T25S R29E Mer At total depth SESE 665FSL 671FEL | | | 10. Field and Pool, or Exploratory WILDCAT; UP WOLFCAMP | | |
| 14. Date Spudded 08/12/2015 | | | 15. Date T.D. Reached 09/20/2015 | | |
| 16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 01/21/2016 | | | 17. Elevations (DF, KB, RT, GL)* 3141 GL | | |
| 18. Total Depth: MD 14865 TVD 10574 | | 19. Plug Back T.D.: MD 14710 TVD 10571 | | 20. Depth Bridge Plug Set: MD 14710 TVD 10571 | |
| 21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE | | | 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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis) | | |

23. Casing and Liner Record (Report all strings set in well)

| 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 |
|-----------|------------|-------------|----------|-------------|----------------------|-----------------------------|-------------------|-------------|---------------|
| 17.500 | 13.375 J55 | 54.5 | 0 | 768 | | 650 | | 0 | |
| 12.250 | 9.625 J55 | 40.0 | 0 | 3285 | | 1350 | | 0 | |
| 8.750 | 7.000 P110 | 29.0 | 0 | 10150 | | 1000 | | 0 | |
| 6.125 | 4.500 P110 | 13.5 | 9658 | 14860 | | 600 | | 9658 | |
| | | | | | | | | | |

24. Tubing Record

| Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) |
|-------|----------------|-------------------|------|----------------|-------------------|------|----------------|-------------------|
| 2.875 | 9821 | 9804 | | | | | | |

25. Producing Intervals

| Formation | Top | Bottom | Perforated Interval | Size | No. Holes | Perf. Status |
|-------------|-------|--------|---------------------|-------|-----------|--------------|
| A) WOLFCAMP | 10966 | 14696 | 10966 TO 14696 | 0.430 | 828 | OPEN |
| B) | | | 14746 TO 14756 | | 60 | UNDER CBP |
| C) | | | | | | |
| D) | | | | | | |

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

| Depth Interval | Amount and Type of Material |
|----------------|-----------------------------|
| 10966 TO 14696 | SEE IN REMARKS |
| | |
| | |

28. Production - Interval A

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| 01/26/2016 | 02/02/2016 | 24 | → | 242.0 | 679.0 | 1668.0 | | | FLOWES |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| 16/64 | 2482 | | → | 242 | 679 | 1668 | | | |

28a. Production - Interval B

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

Pending BLM approvals will
subsequently be reviewed
and scanned *ROD*

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

ELECTRONIC SUBMISSION #330973 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

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. St | 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. St | 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.)
FLARED

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 |
|-----------------|------|--------|------------------------------|----------------|-----------------|
| LAMAR | 3278 | 3321 | | RUSTLER | 783 |
| BELL CANYON | 3322 | 4216 | | TOP OF SALT | 1248 |
| CHERRY CANYON | 4217 | 5409 | | BOTTOM OF SALT | 3075 |
| BRUSHY CANYON | 5410 | 7092 | | LAMAR | 3278 |
| BONE SPRING LM | 7093 | 8069 | | BELL CANYON | 3322 |
| 1ST BONE SPRING | 8070 | 8917 | | CHERRY CANYON | 4217 |
| 2ND BONE SPRING | 8918 | 9985 | | BRUSHY CANYON | 5410 |
| 3RD BONE SPRING | 9986 | 10351 | | BONE SPRING LM | 7093 |

32. Additional remarks (include plugging procedure):

Perfs 15% Sand# Fluid (Gal)
 14595-14696 1512 298973 285012
 14444-14545 3024 299482 299586
 14293-14394 3024 251585 280896
 14138-14242 3024 299410 348306
 13647-13754 4536 296657 434616
 13498-13590 3570 298070 354774
 13349-13448 3024 298866 346458

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 #330973 Verified by the BLM Well Information System.
 For COG PRODUCTION LLC, sent to the Carlsbad

Name (please print) STORMI DAVIS

Title PREPARER

Signature (Electronic Submission)

Date 02/08/2016

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.

** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL **

Additional data for transaction #330973 that would not fit on the form

32. Additional remarks, continued

13200-13296 3024 297986 384678
13056-13142 2940 300392 375354
12902-12999 3024 297777 307986
12753-12852 3066 298846 317688
12604-12704 3024 183134 360738
12455-12555 2982 304418 312144
12306-12404 3024 300426 309246
12158-12257 3024 304615 316512
12009-12106 3024 299685 309540
11860-11955 3150 301579 311346
11711-11810 3024 299602 307230
11562-11661 3024 300516 308070
11413-11512 3024 300362 306978
11264-11363 3066 309044 311010
11118-11214 3024 300314 316302
10966-11065 2982 302929 313404
Totals 70140 6744668 7517874

Additional Tops:

1st Bone Spring 8070
2nd Bone Spring 8918
3rd Bone Spring 9986
Wolfcamp 10352

Surveys are attached.