

State of New Mexico  
Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham  
Governor

Sarah Cottrell Propst  
Cabinet Secretary

Todd E. Leahy, JD, PhD  
Deputy Secretary

Adrienne Sandoval, Division Director  
Oil Conservation Division



4/15/2020

Operator Notice Regarding  
C-104 Denial and Request for Information

OCD is providing notice to operators that it will deny your C-104 – *Request for Allowable and Authorization to Transport* if it fails to provide complete and accurate information, including:

Test Allowable, New Well and Recompleted Well

30-015-45950

AMEND C-104 NW

- C-103 (or BLM equivalent) for all casing strings
  - Spud Notice
  - Surface Casing
  - Intermediate Casing (if applicable)
  - Additional Intermediate Casing (if applicable)
  - Production Casing or Liner
- Applicable Order (NSL, NSP, Other \_\_\_\_\_)
- Deviation Survey for Vertical Wells
- Directional Survey
- C-102 (As-Drilled Plat for Horizontal Well)

New Well and Recompleted Well Only

- C-103 Completion Sundry (or BLM equivalent) -**DENIED C-103 IN WELL FILES  
NO AMENDED RECEIVED**
- C-105 Completion Report (or BLM equivalent)
- All Logs Run on Well -(Please make sure all well logs are submitted)

The sale or transport of product without an approved C-104 violates the Oil and Gas Act and the implementing rules, including 19.15.7.15 and 19.15.16.19 NMAC. If OCD determines that your C-104 is incomplete or inaccurate, it will give you notice to resubmit your C-104 within 30 days. Failure to comply with this notice may result in enforcement action.

**If you have any questions, please contact the local OCD District Office.**

**Complete amended request above, submit electronically via e docs ASAP.**

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

State of New Mexico  
Energy, Minerals & Natural Resources  
Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

RECEIVED  
FEB 25 2020

Form C-104  
Revised August 1, 2011

EMNRD-OCDARTESIA

Submit one copy to appropriate District Office

AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		<sup>2</sup> OGRID Number 229137
		<sup>3</sup> Reason for Filing Code/ Effective Date NW
<sup>4</sup> API Number 30-015-45950	<sup>5</sup> Pool Name Purple Sage; Wolfcamp	<sup>6</sup> Pool Code 98220
<sup>7</sup> Property Code 308744	<sup>8</sup> Property Name Myox 31 State Com	<sup>9</sup> Well Number 603H

**II. <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
A	31	25S	28E		230	North	1250	East	Eddy

**<sup>11</sup> Bottom Hole Location**

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
O	6	26S	28E		202	South	2193	East	Eddy
<sup>12</sup> Lse Code S	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
	ACC	O
298751	Energy Transfer 2001 Bryan Street, Ste 3700 Dallas, TX 75201	G
278421	Holly Refining and Marketing PO Box 159 Artesia, NM 88210	O

**IV. Well Completion Data**

<sup>21</sup> Spud Date 9/29/19	<sup>22</sup> Ready Date 12/29/19	<sup>23</sup> TD 19,218'	<sup>24</sup> PBTB 19,000'	<sup>25</sup> Perforations 9,308-19,097'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2	13 3/8	500'	550		
12 1/4	9 5/8	8483'	2075		
8 3/4	5 1/2	19197'	4205		
	2 7/8	8,526'			

**V. Well Test Data**

<sup>31</sup> Date New Oil 1/20/20	<sup>32</sup> Gas Delivery Date 1/20/20	<sup>33</sup> Test Date 1/20/20	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 1800#	<sup>36</sup> Csg. Pressure 750#
<sup>37</sup> Choke Size 26/64	<sup>38</sup> Oil 60	<sup>39</sup> Water 2509	<sup>40</sup> Gas 200	<sup>41</sup> Test Method Flowing	

<sup>42</sup> 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: *Amanda Avery*  
Printed name: Amanda Avery  
Title: Regulatory Analyst  
E-mail Address: aavery@concho.com  
Date: 2/24/2020 Phone: 575-748-6962

OIL CONSERVATION DIVISION  
Approved by:  
Title:  
Approval Date:  
**"Denied"**  
**"RT" EXPIRED 3/29/2020**

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>RECEIVED</b> <b>FEB 25 2020</b> 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 April 3, 2017
		1. WELL API NO. 30-015-45950
		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN
		3. State Oil & Gas Lease No.

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

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)	5. Lease Name or Unit Agreement Name Myox 31 State Com
	6. Well Number: 603H

7. Type of Completion:  
 NEW WELL  WORKOVER  DEEPENING  PLUGBACK  DIFFERENT RESERVOIR  OTHER

8. Name of Operator COG Operating LLC	9. OGRID 229137
10. Address of Operator 2208 W. Main Street Artesia, NM 88210	11. Pool name or Wildcat Purple Sage; Wolfcamp

12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	A	31	25S	28E		230	North	1250	East	Eddy
BH:	O	6	26S	28E		202	South	2193	East	Eddy

13. Date Spudded 9/29/19	14. Date T.D. Reached 11/3/19	15. Date Rig Released 11/7/19	16. Date Completed (Ready to Produce) 12/29/19	17. Elevations (DF and RKB, RT, GR, etc.) 3014' GR
18. Total Measured Depth of Well 19,218'	19. Plug Back Measured Depth 19,000'	20. Was Directional Survey Made? Yes	21. Type Electric and Other Logs Run None	
22. Producing Interval(s), of this completion - Top, Bottom, Name 9,308-19,097' Wolfcamp				

**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"	54.5#	500'	17 1/2"	550 sx	
9 5/8"	40 #	8483'	12 1/4"	2075 sx	
5 1/2"	20#	19197'	8 3/4"	4205 sx	

24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 7/8"	8526'	8516'
26. Perforation record (interval, size, and number) 9,308 – 19,097' (1400)				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL: 9,308-19,097' AMOUNT AND KIND MATERIAL USED: Acdz w/74,046 gal 7 1/2%; Frac with 24,542,397# sand & 19,316,136 gal fluid			

**28. PRODUCTION**

Date First Production 1/20/20	Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing	Well Status (Prod. or Shut-in) Producing					
Date of Test 1/20/20	Hours Tested 24	Choke Size 26/64"	Prod'n For Test Period 24 Hrs	Oil - Bbl 60	Gas - MCF 200	Water - Bbl. 2509	Gas - Oil Ratio
Flow Tubing Press. 1800#	Casing Pressure 750#	Calculated 24-Hour Rate	Oil - Bbl. 60	Gas - MCF 200	Water - Bbl. 2509	Oil Gravity - API - (Corr.)	

29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold	30. Test Witnessed By Charlie Hoff
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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. Rig Release Date: 11/7/19
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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: *Amanda Avery* Printed Name: Amanda Avery Title: Regulatory Analyst Date: 2/24/20

E-mail Address: aavery@concho.com

