

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 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 _____										6. If Indian, Allottee or Tribe Name 7. Unit or CA Agreement Name and No. MNM88525X																																																																																									
2. Name of Operator COG OPERATING LLC Contact: CHASITY JACKSON E-Mail: cjackson@conchoresources.com										8. Lease Name and Well No. BURCH KEELY UNIT 416																																																																																									
3. Address 550 WEST TEXAS AVENUE SUITE 100 MIDLAND, TX 79701-4287										3a. Phone No. (include area code) Ph: 432-686-3087																																																																																									
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface Sec 18 T17S R30E Mer NMP NWSE 2565FSL 2260FEL At top prod interval reported below Sec 18 T17S R30E Mer NMP At total depth NWSE 2565FSL 2260FEL										9. API Well No. 30-015-37128-00-S1																																																																																									
14. Date Spudded 12/02/2010										15. Date T.D. Reached 12/07/2010																																																																																									
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 01/02/2011										17. Elevations (DF, KB, RT, GL)* 3644 GL																																																																																									
18. Total Depth: MD 5060 TVD 5060										19. Plug Back T.D.: MD 4900 TVD 4900																																																																																									
20. Depth Bridge Plug Set: MD TVD										21. Type Electric & Other Mechanical Logs Run (Submit copy of each) COMPENSATED NEUT																																																																																									
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)										23. Casing and Liner Record (Report all strings set in well)																																																																																									
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(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #100693 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

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.)
CAPTURED

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
YATES QUEEN SAN ANDRES GLORIETA YESO	1093 1985 2680 4100 4160		DOLOMITE & SAND SAND DOLOMITE & ANHYDRITE DOLOMITE & SAND DOLOMITE & ANHYDRITE	YATES QUEEN SAN ANDRES	1093 1985 2680

32. Additional remarks (include plugging procedure):

44. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC. CONTINUED...

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 #100693 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by KURT SIMMONS on 01/18/2011 (11KMS0603SE)

Name (please print) CHASITY JACKSON

Title PREPARER

Signature (Electronic Submission)

Date 01/17/2011

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 **