

Submit To Appropriate District Office Two Copies 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 and Natural Resources  Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505				Form C-105 July 17, 2008				
		1. WELL API NO. <b>30-015-38972</b>								
		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN								
		3. State Oil & Gas Lease No.								
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>										
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 <b>Empire State SWD 9</b>				
7. Type of Completion. <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER						6. Well Number <b>4</b>				
8. Name of Operator <b>COG Operating LLC</b> <i>SWA-1281</i>						9. OGRID <b>229137</b>				
10. Address of Operator <b>550 W Texas Ave, Suite 100 Midland, TX 79701</b>						11. Pool name or Wildcat <b>SWD;Cisco 96099</b>				
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	A	9	17S	29E		660	North	540	East	Eddy
BH:										
13. Date Spudded <b>10/11/11</b>		14. Date T.D. Reached <b>10/24/11</b>		15. Date Rig Released <b>10/25/11</b>		16. Date Completed (Ready to Produce) <b>12/20/11</b>		17. Elevations (DF and RKB, RT, GR, etc.) <b>3582' GR</b>		
18. Total Measured Depth of Well <b>8385</b>		19. Plug Back Measured Depth <b>8385</b>		20. Was Directional Survey Made? <b>No</b>		21. Type Electric and Other Logs Run <b>CN/HNGS, MCFL/HNGS</b>				
22. Producing Interval(s), of this completion - Top, Bottom, Name										
<b>CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT LB /FT		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13-3/8		48		248		17-1/2		500		
9-5/8		40		2405		12-1/4		750		
7		26		8385		8-3/4		1500		
24. LINER RECORD										25. TUBING RECORD
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET			
					3-1/2	8334	8320			
26. Perforation record (interval, size, and number) <b>8405 - 8805 OH</b>					27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED					
<div>RECEIVED APR 4 2012 NMOCD ARTESIA</div>										
<b>PRODUCTION</b>										
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod or Shut-in)				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl	Gas - Oil Ratio			
Flow Tubing Press	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl	Gas - MCF	Water - Bbl	Oil Gravity - API - (Corr)				
29. Disposition of Gas (Sold, used for fuel, vented, etc.)							30. Test Witnessed By <b>Kent Greenway</b>			
31. List Attachments <b>Logs, C-102, Deviation Survey</b>										
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 <i>C Jackson</i>		Printed Name <b>Chasity Jackson</b>		Title <b>Regulatory Analyst</b>		Date <b>4/2/12</b>				
E-mail Address <b>cjackson@concho.com</b>										

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates 879	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers 1146	T. Devonian	T. Cliff House	T. Leadville
T. Queen 1730	T. Silurian	T. Menefee	T. Madison
T. Grayburg 2176	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres 2446	T. Simpson	T. Mancos	T. McCracken
T. Glorieta 3874	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock 3960	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinebry 4384	T. Gr. Wash	T. Dakota	
T. Tubb 5305	T. Delaware Sand	T. Morrison	
T. Drinkard 5388	T. Bone Springs	T. Todilto	
T. Abo 5977	T. Yeso	T. Entrada	
T. Wolfcamp 7182	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C) 8186	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....  
No. 2, from.....to.....

No. 3, from.....to.....  
No. 4, from.....to.....

## IMPORTANT WATER SANDS

**Include data on rate of water inflow and elevation to which water rose in hole.**

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology