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Form 3160-4  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**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		5. Lease Serial No. NMMN94593	
b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator COG OPERATING LLC		7. Unit or CA Agreement Name and No.	
Contact: KANICIA CARRILLO E-Mail: kcastillo@concho.com		8. Lease Name and Well No. FIR FEDERAL 1	
3. Address ONE CONCHO CENTER 600 WILLINOIS AVENUE MIDLAND, TX 79701		9. API Well No. 30-015-32069-00-S2	
3a. Phone No. (include area code) Ph: 432-685-4332		10. Field and Pool, or Exploratory RED LAKE	
4. Location of Well (Report location clearly and in accordance with Federal requirements)*  At surface NWSW 1770FSL 990FWL  At top prod interval reported below NWSW 1770FSL 990FWL  At total depth: NWSW 1770FSL 990FWL		11. Sec., T., R., M., or Block and Survey or Area Sec 25 T17S R27E Mer NMP	
14. Date Spudded 12/03/2001		15. Date T.D. Reached 12/28/2001	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 12/31/2013		17. Elevations (DF, KB, RT, GL)* 3606 KB	
18. Total Depth: MD 7208 TVD 7208		19. Plug Back T.D.: MD 6215 TVD 6215	
20. Depth Bridge Plug Set: MD TVD			

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR		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)	
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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
12.250	8.625 J-55	24.0	0	415		425		0	
7.875	5.500 J-55	17.0	0	7199		1790		0	

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	4651							

25. Producing Intervals				26. Perforation Record			
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status	
A) YESO	3230	4500	3230 TO 3480	0.410	26	OPEN	
B)			3680 TO 3905	0.410	26	OPEN	
C)			3965 TO 4190	0.410	26	OPEN	
D)			4250 TO 4500	0.410	26	OPEN	

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

Depth Interval	Amount and Type of Material
3230 TO 3905	FRAC W/ 235,969 GALS GEL, 266,625# 20/40 WHITE SAND, 62,851# 16/30 SLC.
3230 TO 3905	ACIDIZED W/ 6,000 GALS 15% ACID.
3965 TO 4500	ACIDIZE W/ 7,010 GALS 15% ACID.
3965 TO 4500	FRAC W/ 241,358 GALS GEL, 294,892# 20/40 WHITE SAND, 55,676# 16/30 SLC.

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
01/03/2014	01/14/2014	24	▶	93.0	20.0	240.0	41.1	0.60	BUREAU OF LAND MANAGEMENT ELECTRIC PUMPING UNIT SCHEDULED FIELD OFFICE
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. 70.0	24 Hr. Rate ▶	Oil BBL 93	Gas MCF 20	Water BBL 240	Gas:Oil Ratio 215	Well Status POW	

28a. Production - Interval B

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	

(See Instructions and spaces for additional data on reverse side)  
**ELECTRONIC SUBMISSION #232871 VERIFIED BY THE BLM WELL INFORMATION SYSTEM**  
**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***  
 805 3/31/14  
 Accepted for record  
 NMOCD

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.)  
SOLD

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
SEVEN RIVERS	444	7046		SEVEN RIVERS	444
QUEEN	1224			QUEEN	1224
SAN ANDRES	1757			SAN ANDRES	1757
GLORIETA	3090			GLORIETA	3090
TUBB	4614			TUBB	4614
WOLFCAMP	6902			ABO	5240
			WOLFCAMP	6380	

32. Additional remarks (include plugging procedure):

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 #232871 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by JAMES AMOS on 03/26/2014 (14JA0887SE)**

Name (please print) KANICIA CARRILLO Title PREPARER

Signature (Electronic Submission) Date 01/22/2014

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.

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 & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised June 10, 2003  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number <b>30-015-32069</b>		<sup>2</sup> Pool Code <b>96836</b>		<sup>3</sup> Pool Name <b>Red Lake; Glorieta Yeso-Northeast</b>	
<sup>4</sup> Property Code <b>302494</b>		<sup>5</sup> Property Name <b>Fir Federal</b>			<sup>6</sup> Well Number <b>1</b>
<sup>7</sup> OGRID No. <b>229137</b>		<sup>8</sup> Operator Name <b>COG OPERATING LLC</b>			<sup>9</sup> Elevation <b>3599.5</b>

<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
<b>L</b>	<b>25</b>	<b>17S</b>	<b>27E</b>		<b>1770</b>	<b>South</b>	<b>990</b>	<b>West</b>	<b>Eddy</b>

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>12</sup> Dedicated Acres <b>40</b>	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p><sup>17</sup> OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i></p> <p>Signature <b>Kanicia Castillo</b></p> <p>Printed Name <b>Lead Regulatory Analyst</b></p> <p>Title and E-mail Address <b>1/23/14</b></p> <p>Date</p>
	<p><sup>18</sup> SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i></p> <p>Referred Original Plat</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor:</p> <p>Certificate Number</p>