

|   |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
|---|---|--|--------------------------|---|----------------------|--|--------------------------------------|--------------------------|----------|---------------|----------------|-------------------------------|-------------|--|--|--|
| Submit To Appropriate District Office<br>Two Copies<br>District I<br>1625 N. French Dr., Hobbs. NM 88240<br>District II<br>811 S. First St., Artesia, NM 88210<br>District III<br>1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV<br>1220 S. St. Francis Dr., Santa Fe, NM 87505  | <b>State of New Mexico</b><br><b>Energy, Minerals and Natural Resources</b><br><br><b>Oil Conservation Division</b><br><b>1220 South St. Francis Dr.</b><br><b>Santa Fe, NM 87505</b> | <b>Form C-105</b><br>Revised August 1, 2011  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
|   |   | 1. WELL API NO.<br>30-015-41788  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
|   |   | 2. Type of Lease<br><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:<br><br><input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)<br><br><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<br>MYOX 6 State Com   |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
|   |   | 6. Well Number:<br><br>3H  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| 7. Type of Completion:<br><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   |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| 8. Name of Operator<br>COG Operating LLC  |   | 9. OGRID<br>229137   |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| 10. Address of Operator<br>2208 W. Main Street<br>Artesia, NM 88210   |   | 11. Pool name or Wildcat<br>Hay Hollow; Bone Spring  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| 12. Location  | Unit Ltr  | Section  | Township                 | Range   | Lot                  | Feet from the  | N/S Line                             | Feet from the            | E/W Line | County        |                |                               |             |  |  |  |
| Surface:  | C   | 6  | 26S                      | 28E   |                      | 190  | North                                | 1980                     | West     | Eddy          |                |                               |             |  |  |  |
| BH:   | N   | 7  | 26S                      | 28E   |                      | 341  | South                                | 2032                     | West     | Eddy          |                |                               |             |  |  |  |
| 13. Date Spudded<br>3/3/14  | 14. Date T.D. Reached<br>3/31/14  | 15. Date Rig Released<br>4/3/14  |                          | 16. Date Completed (Ready to Produce)<br>6/2/14 |                      | 17. Elevations (DF and RKB, RT, GR, etc.)<br>3068' GR  |                                      |                          |          |               |                |                               |             |  |  |  |
| 18. Total Measured Depth<br>17761'  |   | 19. Plug Back Measured Depth<br>17761'   |                          | 20. Was Directional Survey Made?<br>Yes         |                      | 21. Type Electric and Other Logs Run<br>CNL, Laterolog   |                                      |                          |          |               |                |                               |             |  |  |  |
| 22. Producing Interval(s), of this completion - Top, Bottom, Name<br>8103-17585' Bone Spring  |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| <b>23. 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#  |                          | 359'  |                      | 17 1/2"  |                                      | 365 sx                   |          | 0             |                |                               |             |  |  |  |
| 9 5/8"  |   | 36#  |                          | 2348'   |                      | 12 1/4"  |                                      | 800 sx                   |          | 0             |                |                               |             |  |  |  |
| 5 1/2"  |   | 17#  |                          | 17718'  |                      | 8 3/4"   |                                      | 3785 sx (TOC @ 1250'-TS) |          | 0             |                |                               |             |  |  |  |
| 24. LINER RECORD  |   |  |                          |   |                      | 25. TUBING RECORD  |                                      |                          |          |               |                |                               |             |  |  |  |
| SIZE  | TOP   | BOTTOM   | SACKS CEMENT             | SCREEN  | SIZE                 | DEPTH SET  | PACKER SET                           |                          |          |               |                |                               |             |  |  |  |
|   |   |  |                          |   | 2 7/8"               | 8071'  | 7400'                                |                          |          |               |                |                               |             |  |  |  |
| 26. Perforation record (interval, size, and number)<br><br>8103-17525' (1152)<br>17575-17585' (60)  |   |  |                          |   |                      | 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>DEPTH INTERVAL</td> <td>AMOUNT AND KIND MATERIAL USED</td> </tr> <tr> <td>8103-17525'</td> <td>Acdz w/203410 gal 7 1/2%; Frac w/12,942,617# sand &amp; 11,519,928 gal fluid</td> </tr> <tr> <td></td> <td></td> </tr> </table> |                                      |                          |          |               | DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED | 8103-17525' | Acdz w/203410 gal 7 1/2%; Frac w/12,942,617# sand & 11,519,928 gal fluid |  |  |
| DEPTH INTERVAL  | AMOUNT AND KIND MATERIAL USED   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| 8103-17525'   | Acdz w/203410 gal 7 1/2%; Frac w/12,942,617# sand & 11,519,928 gal fluid  |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
|   |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| <b>28. PRODUCTION</b>   |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| Date First Production<br>6/5/14   |   | Production Method (Flowing, gas lift, pumping - Size and type pump)<br>Pumping   |                          |   |                      | Well Status (Prod. or Shut-in)<br>Producing  |                                      |                          |          |               |                |                               |             |  |  |  |
| Date of Test<br>7/4/14  | Hours Tested<br>24  | Choke Size   | Prod'n For - Test Period | Oil - Bbl<br>787                                | Gas - MCF<br>1492    | Water - Bbl.<br>3790   | Gas - Oil Ratio                      |                          |          |               |                |                               |             |  |  |  |
| Flow Tubing Press.<br>240#  | Casing Pressure<br>1060#  | Calculated 24-Hour Rate  | Oil - Bbl.<br>787        | Gas - MCF<br>1492                               | Water - Bbl.<br>3790 | Oil Gravity - API - (Corr.)  |                                      |                          |          |               |                |                               |             |  |  |  |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.)<br>Sold  |   |  |                          |   |                      |  | 30. Test Witnessed By<br>Adam Olguin |                          |          |               |                |                               |             |  |  |  |
| 31. List Attachments<br>Directional Surveys   |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |
| 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:<br><br>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   |   | Printed Name: Stormi Davis   |                          | Title Regulatory Analyst                        |                      |  | Date: 7/7/14                         |                          |          |               |                |                               |             |  |  |  |
| E-mail Address: sdavis@concho.com   |   |  |                          |   |                      |  |                                      |                          |          |               |                |                               |             |  |  |  |

