

NM OIL CONSERVATION

ARTESIA DISTRICT

OCT 13 2015

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

RECEIVED

5. Lease Serial No.
NMMN114354

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name	
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 _____		7. Unit or CA Agreement Name and No.	
2. Name of Operator COG OPERATING LLC		Contact: STORMI DAVIS E-Mail: sdavis@concho.com	
3. Address 2208 W MAIN ST ARTESIA, NM 88210		3a. Phone No. (include area code) Ph: 575-748-6946	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 5 T20S R30E Mer NMP At surface NENW Lot 3 190FNL 2250FWL At top prod interval reported below Sec 8 T20S R30E Mer NMP At total depth SENW 2303FNL 1973FWL		8. Lease Name and Well No. SOLUTION FEDERAL COM 3H	
14. Date Spudded 08/02/2015		15. Date T.D. Reached 08/22/2015	
18. Total Depth: MD 15567 TVD 8477		19. Plug Back T.D.: MD 15465 TVD 8476	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE		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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)	

9. API Well No.
30-015-43227

10. Field and Pool, or Exploratory
PARKWAY; BONE SPRING

11. Sec., T., R., M., or Block and Survey
or Area Sec 5 T20S R30E Mer NMP

12. County or Parish
EDDY

13. State
NM

17. Elevations (DF, KB, RT, GL)*
3252 GL

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
26.000	20.000 J55	94.0	0	350		1200		0	
17.500	13.375 J55	54.5	0	1680		1575		0	
12.250	9.625 J55	40.0	0	3438	1903	1350		0	
8.750	7.000 P110	29.0	0	7699		2700		0	
8.750	6.500 P110	17.0	7700	15563				0	

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	8015							

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	8534	15440	8534 TO 15440	0.430	828	OPEN
B)			15490 TO 15500		60	UNDER CBP
C)						
D)						

Depth Interval	Amount and Type of Material
8534 TO 15440	SEE IN REMARKS

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
09/30/2015	10/04/2015	24	→	727.0	550.0	1506.0			ELECTRIC PUMP SUB-SURFACE
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	410	145.0	→	727	550	1506		POW	

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 #318878 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

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.)
FLARED

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
DELAWARE	3589	6180		RUSTLER	124
BONE SPRING LM	6181	7445		CAPITAN	2002
1ST BONE SPRING	7446	8026		DELAWARE	3589
2ND BONE SPRING	8027	8477		BONE SPRING LM	6181
				1ST BONE SPRING	7446
				2ND BONE SPRING	8027

32. Additional remarks (include plugging procedure):
Perfs 7 1/2% Acid Sand(#) Fluid (Gal)
15440 15338 15237 1512 451316 361830
15135 15034 14932 2478 451901 414666
14829 14729 14628 3024 451274 383631
14526 14422 14323 3108 456735 385754
14221 14120 14015 3066 452451 383033
13917 13815 13713 3024 450099 379672
13609 13510 13409 3024 450101 379417

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 #318878 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Carlsbad**

Name (please print) STORMI DAVIS Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 10/06/2015

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.

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