

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						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. Resv.							
Other _____						7. Unit or CA Agreement Name and No.	
2. Name of Operator COG OPERATING LLC						8. Lease Name and Well No. BASEBALL CAP FEDERAL COM 601H	
Contact: AMANDA AVERY E-Mail: aavery@concho.com							
3. Address 2208 W MAIN STREET ARTESIA, NM 88210				3a. Phone No. (include area code) Ph: 575-748-6940		9. API Well No. 30-025-45783	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 25 T24S R34E Mer NMP At surface SESE Lot P 430FSL 1080FEL 32.182232 N Lat, 103.418678 W Lon Sec 25 T24S R34E Mer NMP At top prod interval reported below SESE Lot P 430FSL 1080FEL 32.182232 N Lat, 103.418678 W Lon Sec 24 T24S R34E Mer NMP At total depth NENE Lot A 200FNL 790FEL 32.209718 N Lat, 103.417715 W Lon						10. Field and Pool, or Exploratory RED HILL; BONE SPRING	
						11. Sec., T., R., M., or Block and Survey or Area Sec 25 T24S R34E Mer NMP	
						12. County or Parish LEA	
						13. State NM	
14. Date Spudded 05/16/2019		15. Date T.D. Reached 08/18/2019		16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 02/21/2020		17. Elevations (DF, KB, RT, GL)* 3378 GL	
18. Total Depth:		MD TVD		22676 12543		19. Plug Back T.D.: MD TVD	
				22575 12543		20. Depth Bridge Plug Set: MD TVD	
						22575 12543	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)				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)			

23. Casing and Liner Record (Report all strings set in well)

[illegible]

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	12008	11998						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	12855	22550	12855 TO 22550		1470	OPEN
B)						
C)						
D)						



26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	12855	22550	12855 TO 22550		1470	OPEN
B)						
C)						
D)						



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

Depth Interval	Amount and Type of Material
12855 TO 22550	SEE ATTACHED INFORMATION

28. Production - Interval A

Date First Produced 02/26/2020	Test Date 02/26/2020	Hours Tested 24	Test Production 	Oil BBL 1383.0	Gas MCF 1759.0	Water BBL 4857.0	Oil Gravity Corr. API	Gas Gravity	Production Method GAS LIFT
Choke Size 24/64	Tbg. Press. Flwg. 1450 SI	Csg. Press. 2700.0	24 Hr. Rate 	Oil BBL 1383	Gas MCF 1759	Water BBL 4857	Gas:Oil Ratio	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 #509117 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

PM

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
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Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
RUSTLER	908			RUSTLER	908
TOP OF SALT	1399			TOP OF SALT	1399
BOTTOM OF SALT	5227			BOTTOM OF SALT	5227
LAMAR	5539			LAMAR	5539
BELL CANYON	5568			BELL CANYON	5568
CHERRY CANYON	6573			CHERRY CANYON	6573
BRUSHY CANYON	8202			BRUSHY CANYON	8202
BONE SPRING LIMESTONE	9451			BONE SPRING LIMESTONE	9451

32. Additional remarks (include plugging procedure):
 FIRST BONE SPRING 10669
 SECOND BONE SPRING 11229
 THIRD BONE SPRING 12303

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 #509117 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs

Name(*please print*) AMANDA AVERY Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 03/31/2020

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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