

99Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	Form C-105 Revised April 3, 2017  1. WELL API NO. <b>30-025-44788</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>Toque State Com</b>  6. Well Number: <p style="text-align: center;">602H</p>																														
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																																
8. Name of Operator <b>Ascent Energy, LLC</b>		9. OGRID <b>325830</b>																														
10. Address of Operator <b>1125 17<sup>th</sup> St., Ste 410</b> <b>Denver, CO 80202</b>		11. Pool name or Wildcat WC-025 G-8 S213304D; Bone Spring																														
12. Location <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Unit Ltr</th> <th>Section</th> <th>Township</th> <th>Range</th> <th>Lot</th> <th>Feet from the</th> <th>N/S Line</th> <th>Feet from the</th> <th>E/W Line</th> <th>County</th> </tr> <tr> <td><b>Surface:</b> K</td> <td>6</td> <td>21 S</td> <td>33 E</td> <td></td> <td>2514'</td> <td>South</td> <td>1700'</td> <td>West</td> <td>Lea</td> </tr> <tr> <td><b>BH:</b> L4</td> <td>7</td> <td>21 S</td> <td>33 E</td> <td></td> <td>50'</td> <td>South</td> <td>835'</td> <td>West</td> <td>Lea</td> </tr> </table>	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County	<b>Surface:</b> K	6	21 S	33 E		2514'	South	1700'	West	Lea	<b>BH:</b> L4	7	21 S	33 E		50'	South	835'	West	Lea		
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13. Date Spudded <b>7/29/2019</b>	14. Date T.D. Reached <b>11/25/2019</b>	15. Date Rig Released <b>11/27/2019</b>	16. Date Completed (Ready to Produce) <b>2/7/2020</b>	17. Elevations (DF and RKB, RT, GR, etc.) 3794' GR																												
18. Total Measured Depth of Well 19179'		19. Plug Back Measured Depth 19139'	20. Was Directional Survey Made? Yes	21. Type Electric and Other Logs Run																												
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>11336'-19106' Bone Spring</b>																																
<b>23. CASING RECORD (Report all strings set in well)</b>																																
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED																											
13.375"	54.5#	1671'	17.5"	1445 sx																												
9.625"	40#	5629'	12.25"	1005 sx																												
5.5"	20#	19139'	8.75"	3250 sx																												
<b>24. LINER RECORD</b>																																
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN																												
<b>25. TUBING RECORD</b>			SIZE	DEPTH SET	PACKER SET																											
26. Perforation record (interval, size, and number) <b>11336'-19106'</b>			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td>11336'-19106'</td> <td>459,175 bbls water 25,500 gallons 7.5% HCL acid 18,297,035 lbs proppant</td> </tr> <tr> <td></td> <td>*See Frac Focus</td> </tr> </table>			DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	11336'-19106'	459,175 bbls water 25,500 gallons 7.5% HCL acid 18,297,035 lbs proppant		*See Frac Focus																					
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<b>28. PRODUCTION</b>																																
Date First Production 3-13-2020		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing		Well Status (Prod. or Shut-in) Producing																												
Date of Test 6-2-2020	Hours Tested 24 Hrs	Choke Size 67/64"	Prod'n For Test Period 24 Hrs 1716	Oil - Bbl 1716	Gas - MCF 2123																											
				Water - Bbl. 4455	Gas - Oil Ratio 1237																											
Flow Tubing Press. n/a	Casing Pressure 605#	Calculated 24-Hour Rate	Oil - Bbl. 1716	Gas - MCF 2123	Water - Bbl. 4455																											
					Oil Gravity - API - (Corr.)																											
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold					30. Test Witnessed By Nick Lane																											
31. List Attachments Updated C104 NW																																
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.					33. Rig Release Date: 11/27/2019																											
34. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude _____ Longitude _____ NAD83																																
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: Ben Metz		Title: VP Exploration		Date: 8/20/2020																											
E-mail Address: bmetz@ascentenergy.us																																

### 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
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