

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

State of New Mexico
Energy, Minerals & Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

JUL 09 2015

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 229137
		³ Reason for Filing Code/ Effective Date RT for 20000 BO for June 2015
⁴ API Number 30 - 025-41687	⁵ Pool Name Red Hills; Bone Spring, North	⁶ Pool Code 96434
⁷ Property Code 40400	⁸ Property Name Sebastian Federal Com	⁹ Well Number 1H

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
D	18	24S	34E	1	190	North	660	West	Lea

¹¹ Bottom Hole Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
M	18	24S	34E	4	342	South	680	West	Lea

¹² Lse Code F	¹³ Producing Method Code F	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
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III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
35103	Sunoco Partners Marketing & Terminals, LP P.O. Box 5090 Sugarland, TX 77479	O

TEST ALLOWABLE EXPIRES 6/30/15

IV. Well Completion Data

²¹ Spud Date 2/1/15	²² Ready Date 6/2/15	²³ TD 15427'	²⁴ PBDT 15350'	²⁵ Perforations 10974-15330'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	1390'	950		
12 1/4"	9 5/8"	5209'	1650		
8 3/4"	5 1/2"	15417'	3200		
	2 7/8"	10305'			

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas		⁴¹ Test Method

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Stormi Davis*

Printed name:
Stormi Davis

Title:
Regulatory Analyst

E-mail Address:
sdavis@concho.com

Date:
7/3/15

Phone:
575-748-6946

OIL CONSERVATION DIVISION

Approved by: *[Signature]*

Title: **Petroleum Engineer**

Approval Date: *07/13/15*

ReComp _____ Add New Well _____
 Canc'l Well _____ Create Pool _____
 E-PERMITTING --- New Well *Test Allowable PM*

Comp _____ P&A _____ TA _____
 CSNG _____ Loc Chng _____

JUL 14 2015

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OGD

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

JUL 09 2015

Lease Serial No.
NMNM123528

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.		7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. SEBASTIAN FEDERAL COM 1H	
2. Name of Operator COG OPERATING LLC	Contact: STORMI DAVIS E-Mail: sdavis@concho.com	9. API Well No. 30-025-41687
3a. Address 2208 W MAIN STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946	10. Field and Pool, or Exploratory RED HILLS; BONE SPRING, N
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 18 T24S R34E Mer NMP NWNW 190FNL 660FWL		11. County or Parish, and State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

3/9/15 to 4/15/15 MIRU. Test to 9500# for 15 mins. Good test. Test 9 5/8" to 1500#. Test 5 1/2" csg to 8500# for 15 mins. Good test. Drill out DVT, FC, FS & new formation to 15427'. Circulate clean. Load & test annulus to 1500# for 15 mins. Good test. Set CBP @ 15350'. Test to 6940#. Good test. Perf 15320-15330' (60). Injection test.

5/20/15 to 5/23/15 Perforate Bone Spring 10974-15270' (792). Acdz w/133788 gal 7 1/2% acid. Frac w/6896253# & 7038655 gal fluid. SI to frac Sebastian #2H.

5/30/15 Drilled out frac plugs & clean down to CBP @ 15350'.

6/2/15 Set 2 7/8" 6.5# L-80 tbg @ 10305' & pkr @ 10295'. Installed gas-lift system.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #307970 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs	
Name (Printed/Typed) STORMI DAVIS	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 07/03/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

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.

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

Additional data for EC transaction #307970 that would not fit on the form

32. Additional remarks, continued

6/3/15 Began flowing back & testing.

6/4/15 Date of first production.