

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

SEP 14 2015

Submit one copy to appropriate District Office

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 NW
⁴ API Number 30 - 025-42293	⁵ Pool Name Lea; Bone Spring	⁶ Pool Code 37570
⁷ Property Code 313919	⁸ Property Name Black Pearl 1 Federal	⁹ Well Number 2H

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
1	1	20S	34E		190	North	1090	East	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
O	1	20S	34E		340	South	1982	East	Lea
¹² Lse Code F	¹³ Producing Method Code F		¹⁴ Gas Connection Date 9/9/15		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
278421	Holly Refining & Marketing Company, LLC P.O. Box 159 Artesia, NM 88211-0159	O
24650	Targa Midstream Services, LP 1000 Louisiana - Ste 4700 Houston, TX 77002	G

IV. Well Completion Data

²¹ Spud Date 7/12/15	²² Ready Date 9/4/15	²³ TD 15632'	²⁴ PBDT 15568'	²⁵ Perforations 11149-15540'	²⁶ DHC, MC
²⁷ Hole Size		²⁸ Casing & Tubing Size		²⁹ Depth Set	³⁰ Sacks Cement
17 1/2"		13 3/8"		1935'	1200
12 1/4"		9 5/8"		3475'	1000
8 3/4"		5 1/2"		15632'	2665
		2 7/8"		10322'	

V. Well Test Data

³¹ Date New Oil 9/5/15	³² Gas Delivery Date 9/9/15	³³ Test Date 9/9/15	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 1075#	³⁶ Csg. Pressure
³⁷ Choke Size 22/64"	³⁸ Oil 350	³⁹ Water 823	⁴⁰ Gas 635	⁴¹ Test Method Flowing	

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: <i>Stormi Davis</i>		OIL CONSERVATION DIVISION	
Printed name: Stormi Davis		Approved by: <i>[Signature]</i>	
Title: Regulatory Analyst		Title: Petroleum Engineer	
E-mail Address: sdavis@concho.com		Approval Date: 09/05/15	
Date: 9/11/15	Phone: 575-748-6946	reComp _____ Add New Well _____ Canc'l Well _____ Create Pool _____ E-PERMITTING -- New Well _____ Comp P.M. P&A _____ TA _____ CSNG P.M. Loc Chng _____	

SEP 16 2015

[Handwritten mark]

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.		5. Lease Serial No. NMNM128366
		6. If Indian, Allottee or Tribe Name
		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. BLACK PEARL 1 FEDERAL 2H	
2. Name of Operator COG OPERATING LLC	Contact: STORMI DAVIS E-Mail: sdavis@concho.com	9. API Well No. 30-025-42293
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 LEA; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T20S R34E Mer NMP NENE 190FNL 1090FEL		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 Drilling Operations
	<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.)

7/12/15 Spud well.

7/13/15 TD 17 1/2" hole @ 1935'. Set 13 3/8" 54.5# J-55 csg @ 1935'. Cmt w/950 sx Class C. Tailed in w/250 sx. Circ 42 sx to surface. WOC 18 hrs. Test csg to 1200# for 30 mins. Drilled out 5' below FS w/10# brine - no loss of circ.

7/15/15 TD 12 1/4" hole @ 3475'. Set 9 5/8" 40# J-55 csg @ 3475'. Cmt w/750 sx Class C. Tailed in w/250 sx. Circ 130 sx to surface. WOC 18 hrs. Test csg to 1500# for 30 mins. Drilled out 5' below FS w/10# brine - no loss of circ.

7/29/15 TD 8 3/4" lateral @ 15632' (KOP @ 10540'). Set 5 1/2" 17# P-110 csg @ 15632'. Cmt w/1350 sx Class C. Tailed in w/1315 sx. Circ 96 sx to surface.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #312874 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 08/17/2015

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 #312874 that would not fit on the form

32. Additional remarks, continued

7/31/15 Rig released.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

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

SUNDRY NOTICES AND REPORTS ON WELLS
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SEP 14 2015

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. BLACK PEARL 1 FEDERAL 2H
2. Name of Operator COG OPERATING LLC Contact: STORMI DAVIS E-Mail: sdavis@concho.com		9. API Well No. 30-025-42293
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 LEA; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T20S R34E Mer NMP NENE 190FNL 1090FEL		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.)

8/4/15 MIRU. Test to 9500#. Load & test annulus to 1500#. Good test. Set CBP @ 15568' & test csg to 8100#. Perforate 15530-15540' (60). Perform injection test.

8/24/15 to 8/29/15 Perforate 11149-15476' (828). Acdz w/72030 gal 7 1/2%; frac w/7157027# sand & 7320390 gal fluid.

8/31/15 to 9/1/15 Drilled out CFP's. Clean to CBP @ 15568'.

9/4/15 Set 2 7/8" 6.5# L-80 tbg @ 10322' & pkr @ 10314'.

9/5/15 Began flowing back & testing. Date of first production.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #316078 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 09/11/2015

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 ****

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

5. Lease Serial No.
NMNM128366

1a. Type of Well Oil Well Gas Well Dry Other
 b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
 Other _____

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)*
 At surface: NENE Lot 1 190FNL 1090FEL
 Sec 1 T20S R34E Mer NMP
 Sec 1 T20S R34E Mer
 At top prod interval reported below
 Sec 1 T20S R34E Mer NMP
 At total depth: SWSE 340FSL 1982FEL

6. If Indian, Allottee or Tribe Name
 7. Unit or CA Agreement Name and No.
 8. Lease Name and Well No.
 BLACK PEARL 1 FEDERAL 2H
 9. API Well No.
 30-025-42293
 10. Field and Pool, or Exploratory
 LEA; BONE SPRING
 11. Sec., T., R., M., or Block and Survey
 or Area: Sec 1 T20S R34E Mer NMP
 12. County or Parish: LEA
 13. State: NM
 14. Date Spudded: 07/12/2015
 15. Date T.D. Reached: 07/29/2015
 16. Date Completed: D & A Ready to Prod.
 09/04/2015
 17. Elevations (DF, KB, RT, GL)*
 3694 GL
 18. Total Depth: MD 15632 TVD 11000
 19. Plug Back T.D.: MD 15568 TVD 11000
 20. Depth Bridge Plug Set: MD 15568 TVD 11000
 21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
 NONE
 22. Was well cored? No Yes (Submit analysis)
 Was DST run? No Yes (Submit analysis)
 Directional Survey? No Yes (Submit analysis)

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

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
17.500	13.375 J55	54.5	0	1935		1200		0	
12.250	9.625 J55	40.0	0	3475		1000		0	
8.750	5.500 P110	17.0	0	15632		2665		0	

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	10322	10314						

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	11149	15540	11149 TO 15476	0.430	828	OPEN
B)			15530 TO 15540		60	OPEN
C)						
D)						

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

Depth Interval	Amount and Type of Material
11149 TO 15476	SEE IN REMARKS

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
09/05/2015	09/09/2015	24	▶	350.0	635.0	823.0			FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
22/64	1075 SI		▶	350	635	823		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.	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 #316082 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.)
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

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
DELAWARE	5888	8137		RUSTLER	1816
BONE SPRING LM	8138	9604		TOS	1909
1ST BONE SPRING	9605	10306		BOS	3401
2ND BONE SPRING	10307	10892		YATES	3642
3RD BONE SPRING	10892	11001		SEVEN RIVERS	3914
				CAPITAN	4813
				DELAWARE	5888
				BONE SPRING LM	8138

32. Additional remarks (include plugging procedure):

Perfs 7 1/2% Acid Sand(#) Fluid (Gal)
 15353-15476 5544 317442 349860
 15161-15289 3066 310698 322518
 14968-15095 3024 310993 317940
 14779-14907 3150 311040 320460
 14588-14716 3024 311818 320544
 14397-14524 3024 310240 318654
 14206-14333 3024 310721 315840

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 #316082 Verified by the BLM Well Information System.
 For COG OPERATING LLC, sent to the Hobbs**

Name (please print) STORMI DAVIS Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 09/11/2015

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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****

Additional data for transaction #316082 that would not fit on the form

32. Additional remarks, continued

14015-14142 2940 310591 304080
13824-13951 2982 310951 316008
13633-13760 3108 311017 314664
13441-13569 3024 310489 316638
13247-13373 3024 310669 315252
13059-13187 3024 310579 316932
12868-12992 3066 310349 316680
12677-12804 2940 310319 336336
12486-12613 2940 311154 315000
12295-12422 3024 310147 316470
12104-12231 3024 309632 314874
11912-12040 3024 309494 313026
11721-11849 2940 310186 312102
11530-11658 3066 310044 317646
11339-11467 3024 310169 310086
11149-11275 3024 318285 318780
Totals 72030 7157027 7320390

Additional tops:

1st Bone Spring: 9605
2nd Bone Spring: 10307
3rd Bone Spring: 10892

Surveys Attached