

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

HOBBS OCD

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

JUL 18 2016

RECEIVED

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

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 - 025-43001	⁵ Pool Name WC-025 G-06 S223421L; Bone Spring	⁶ Pool Code 97922
⁷ Property Code 315744	⁸ Property Name Smalls Federal	⁹ Well Number 1H

II. ¹⁰ Surface Location

Ul or lot no. P	Section 28	Township 22S	Range 34E	Lot Idn	Feet from the 190	North/South Line South	Feet from the 560	East/West line East	County Lea
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¹¹ Bottom Hole Location

Ul or lot no. A	Section 28	Township 22S	Range 34E	Lot Idn	Feet from the 341	North/South Line North	Feet from the 654	East/West line East	County 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				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address Tiller Well Service 221 S. College Ave Tyler, TX 75702	²⁰ O/G/W O

IV. Well Completion Data

²¹ Spud Date 1/27/16	²² Ready Date 6/21/16	²³ TD 14831'	²⁴ PBDT 14760'	²⁵ Perforations 10513-14720'	²⁶ DHC, MC
²⁷ Hole Size 20"	²⁸ Casing & Tubing Size 16"	²⁹ Depth Set 2012'	³⁰ Sacks Cement 1925		
14 3/4"	11 3/4"	3750'	1700		
10 5/8"	8 5/8"	5306'	625		
7 7/8"	5 1/2"	14815'	2150 (TOC @ 2900')		
	2 7/8"	9830'			

V. Well Test Data

³¹ Date New Oil 6/22/16	³² Gas Delivery Date	³³ Test Date 7/1/16	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 1550#	³⁶ Csg. Pressure 850#
³⁷ Choke Size 30/64"	³⁸ Oil 769	³⁹ Water 1703	⁴⁰ Gas 931		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:

Printed name:
Stormi Davis

Title:
Regulatory Analyst

E-mail Address:
sdavis@concho.com

Date:
7/14/16

Phone:
575-748-6946

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Petroleum Engineer

07/21/16

E-PERMITTING -- New Well _____
Comp _____ P&A _____ TA _____
CSNG PM Loc Chng _____
ReComp _____ Add New Well _____
Cancl Well _____ Create Pool _____

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**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

JUL 18 2016

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM116047
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: STORMI DAVIS E-Mail: sdavis@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 2208 WEST MAIN ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-6946	8. Well Name and No. SMALLS FEDERAL 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 28 T22S R34E Mer NMP SESE 190FSL 560FEL		9. API Well No. 30-025-43001
		10. Field and Pool, or Exploratory WILDCAT; BONE SPRING
		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 recompleat 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 recompleat 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.)

3/7/16 to 3/10/16 Load & test annulus to 1500#. Good test. Ran CBL. TOC @ 2900'. Set CBP @ 14760'. Test csg to 8350#. Good test. Perforate 14710-14720' (60). Injection test.

6/6/16 to 6/16/16 Perforate 10513-14658' (1260). Acdz w/106,950 gal 15% acid; Frac w/8,243,514# sand & 11,918,580 gal fluid.

6/18/16 to 6/19/16 Drilled out all CFP's. Clean down to CBP @ 14760'.

6/21/16 Set 2 7/8" 6.5# L-80 tbg @ 9830' & pkr @ 9813'.

6/22/16 Began flowing back & testing. Date of first production.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #344586 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs	
Name (Printed/Typed) STORMI DAVIS	Title PREPARER
Signature (Electronic Submission)	Date 07/14/2016

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

HOBBS OCD

JUL 18 2016

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

Lease Serial No.
NMNM116047

RECEIVED

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 WEST MAIN 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 SESE 190FSL 560FEL At top prod interval reported below Sec 28 T22S R34E Mer NMP At total depth NENE 341FNL 654FEL			8. Lease Name and Well No. SMALLS FEDERAL 1H		
14. Date Spudded 01/27/2016			15. Date T.D. Reached 02/29/2016		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 06/21/2016			9. API Well No. 30-025-43001		
18. Total Depth: MD 14831 TVD 10330			19. Plug Back T.D.: MD 14760 TVD 10332		
20. Depth Bridge Plug Set: MD 14760 TVD 10332			10. Field and Pool, or Exploratory WILDCAT; BONE SPRING		
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CNL; LATEROLOG			11. Sec., T., R., M., or Block and Survey or Area Sec 28 T22S R34E Mer NMP		
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)			12. County or Parish LEA		
23. Casing and Liner Record (Report all strings set in well)			13. State NM		
17. Elevations (DF, KB, RT, GL)* 3404 GL			11. Sec., T., R., M., or Block and Survey or Area Sec 28 T22S R34E Mer NMP		

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
20.000	16.000 J55	84.0	0	2012		1925		0	
14.750	11.750 J55	47.0	0	3750		1700		0	
10.625	8.625 K55	32.0	0	5306	3890	625		0	
7.875	5.500 P110	17.0	0	14815		2150		2900	

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	9830	9813						

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	10513	14720	10513 TO 14658	0.430	1260	OPEN
B)			14710 TO 14720		60	OPEN
C)						
D)						

Depth Interval	Amount and Type of Material
10513 TO 14658	SEE ATTACHED

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
06/22/2016	07/01/2016	24	→	769.0	931.0	1703.0			FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
30/64	SI 1550	850.0	→	769	931	1703		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.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #344588 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
BRUSHY CANYON	7160	8482		BRUSHY CANYON	7160
BONE SPRING LM	8483	9572		BONE SPRING LM	8483
1ST BONE SPRING	9573	10041		1ST BONE SPRING	9573
2ND BONE SPRING	10042	10944		2ND BONE SPRING	10042
3RD BONE SPRING	10945	11307		3RD BONE SPRING	10945
WOLFCAMP	11308	11500		WOLFCAMP	11308

32. Additional remarks (include plugging procedure):
Logs, Surveys & perms/stimulation are attached.

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 #344588 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs

Name (please print) STORMI DAVIS

Title PREPARER

Signature (Electronic Submission)

Date 07/14/2016

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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