

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

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 - 025-44736	⁵ Pool Name WC025G06S223421L - Bone Spring	⁶ Pool Code 17644
⁷ Property Code 312816	⁸ Property Name Avion Federal	⁹ Well Number 301H

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
A	22	23S	32E		480	North	330	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
P	27	23S	32E		207	South	327	East	Lea

¹² Lse Code P	¹³ Producing Method Code F	¹⁴ Gas Connection Date 12/18/18	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
	ACC	O
298751	Lucid	G

IV. Well Completion Data

²¹ Spud Date 9/10/18	²² Ready Date 12/18/18	²³ TD 19671' 9592'	²⁴ PBTB 19578'	²⁵ Perforations 9784-19553'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	1305'	1000		
12 1/4"	9 5/8"	4853'	1500		
8 3/4"	5 1/2"	19647'	3400		
	2 7/8"	9091'			

V. Well Test Data

³¹ Date New Oil 12/18/18	³² Gas Delivery Date 12/18/18	³³ Test Date 12/18/18	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 800#	³⁶ Csg. Pressure 750
³⁷ Choke Size 31/64"	³⁸ Oil 37	³⁹ Water 3078	⁴⁰ Gas 192	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: *Amanda Avery*

Printed name:
Amanda Avery

Title:
Regulatory Analyst

E-mail Address:
aavery@concho.com

Date:
02/14/19

Phone:
575-748-6962

OIL CONSERVATION DIVISION	
Approved by: <i>Karen Sharp</i>	
Title: <i>Staff Mgr</i>	
Approval Date: <i>2-19-19</i>	

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires January 31, 2018

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.

5 Lease Serial No.
NMNM88163

6 If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7 If Unit or CA/Agreement, Name and/or No

1 Type of Well
 Oil Well Gas Well Other

8 Well Name and No
AVION FEDERAL 301H

2 Name of Operator
COG OPERATING LLC
Contact: AMANDA AVERY
E-Mail: aavery@concho.com

9 API Well No.
30-025-44736

3a Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b Phone No. (include area code)
Ph: 575-748-6940

10 Field and Pool or Exploratory Area
WC025G06S223421L-BONE SPR

4 Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 22 T23S R32E Mer NMP NENE 480FNL 330FEL

11 County or Parish, State
LEA COUNTY, NM

12 CHECK THE 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"/> Hydraulic Fracturing	<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 Hydraulic Fracture
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

- 10/25/18 Test annulus to 1500# Set CBP @ 19,578' and test csg to 8,480#. Good test.
- 11/11/18 - 11/26/18 Perf 9,784-19,553' (1650) Acdz w/168,916 gal 7 1/2%; frac w/19,498,253# sand & 19,002,714 gal fluid
- 11/27/18 - 11/30/18 Drilled out CFP's. Clean down to PBDT @ 19,578'.
- 12/01/18 - 12/02/18 Set 2 7/8" 6.5# L-80 tbg @ 9,091' packer @ 9,073. Installed gas lift system
- 12/12/18 Began flowing back & testing
- 12/18/18 Date of first production

14. I hereby certify that the foregoing is true and correct
Electronic Submission #454650 verified by the BLM Well Information System
For COG OPERATING LLC, sent to the Hobbs

Name (Printed/Typed) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission) Date 02/14/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____

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 _____

Documents pending BLM approvals will subsequently be reviewed and scanned

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 any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD
FEB 18 2019
RECEIVED

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No. MNM88163

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No. AVION FEDERAL 301H

9. API Well No. 30-025-44736

10. Field and Pool, or Exploratory WILDCAT; BONE SPRING

11. Sec., T., R., M., or Block and Survey or Area Sec 22 T23S R32E Mer NMP

12. County or Parish LEA 13. State NM

14. Date Spudded 09/10/2018 15. Date T.D. Reached 10/12/2018 16. Date Completed 12/18/2018
 D & A Ready to Prod.

17. Elevations (DF, KB, RT, GL)* 3699 GL

18. Total Depth: MD 19671 19. Plug Back T.D.: MD 19578
TVD 9603 TVD 9603 20. Depth Bridge Plug Set: MD 19578
TVD 9603

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

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	1305		1000		0	
12.250	9.625 L80	40.0	0	4853		1500		0	
8.750	5.500 P110	17.0	0	19647		3400		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	9091	9073						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9784	19553	9784 TO 19553		1650	
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
9784 TO 19553	SEE ATTACHED

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
12/18/2018	12/18/2018	24	▶	37.0	192.0	3078.0			GAS LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
31/64	800 SI	750.0	▶	37	192	3078		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	
	SI		▶						

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

ELECTRONIC SUBMISSION #454653 VERIFIED BY THE BLM WELL INFORMATION SY.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED

Documents pending BLM approvals will subsequently be reviewed and scanned

...IED **

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
RUSTLER	1189			RUSTLER	1189
TOP OF SALT	1651			TOP OF SALT	1651
BOTTOM OF SALT	4665			BOTTOM OF SALT	4665
LAMAR	4920			LAMAR	4920
BELL CANYON	4966			BELL CANYON	4966
CHERRY CANYON	5823			CHERRY CANYON	5823
BRUSHY CANYON	7518			BRUSHY CANYON	7518
BONE SPRING LIMESTONE	8779			BONE SPRING LIMESTONE	8779

32. Additional remarks (include plugging procedure):

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 #454653 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs**

Name (please print) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE

Signature _____ (Electronic Submission) Date 02/14/2019

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 ****