

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

Form C-104
Revised August 1, 2011

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

HOBBS OCD
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MAR 06 2019

Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORITY TO TRANSPORT

¹ Operator name and Address COG Production LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 217955
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-44629	⁵ Pool Name Wildcat; Bone Spring	⁶ Pool Code 97784
⁷ Property Code 314193	⁸ Property Name Eider Federal	⁹ Well Number 101H

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
M	35	24S	32E		240	South	1020	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
L	26	24S	32E		2410	South	356	West	Lea

¹² Lse Code	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
P	F	2/10/19			

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
312917	ACC	O
298751	Lucid	G

IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBTB	²⁵ Perforations	²⁶ DHC, MC
8/22/18	2/10/19	16504'	16415'	9407-16400'	
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set		³⁰ Sacks Cement	
17 1/2"	13 3/8"	993'		800	
12 1/4"	9 5/8"	4800'		1400	
8 3/4"	5 1/2"	16484'		2555	
	2 7/8"	8701'			

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
2/10/19	2/10/19	2/10/19	24 Hrs	1000#	750#
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas	⁴¹ Test Method	
28/64"	580	2644	776	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:
03/04/19

Phone:
575-748-6962

OIL CONSERVATION DIVISION

Approved by: *Jaren Sharp*

Title: *Staff Mgr*

Approval Date:
3-6-19

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

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.

MAR 06 2019

5. Lease Serial No.
NMMN120907

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 4

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

8. Well Name and No.
EIDER FEDERAL 101H

9. API Well No.
30-025-44629

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

11. County or Parish, State
LEA COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
COG PRODUCTION LLC

Contact: AMANDA AVERY
E-Mail: aavery@concho.com

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 35 T24S R32E Mer NMP SWSW 240FSL 1020FWL
32.167475 N Lat, 103.650690 W Lon

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Hydraulic Fracture
	<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.

09/22/18 Test annulus to 1500# Set CBP @ 16,425' and test csg to 8,503#. Good test.

10/2/18 to 10/20/18 Perf 9,407-16,400' (1170). Acdz w/59,724 gal 7 1/2%; frac w/11,137,350# sand & 12,432,588 gal fluid.

12/2/18 to 12/3/18 Drilled out CFP's. Clean down to PBSD @ 16,415'.

12/4/18 -12/5/18 Set 2 7/8" 6.5# L-80 tbg @ 8,701' packer @ 8,691'. Installed gas lift system.

2/10/19 Began flowing back & testing and date of first production

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #456628 verified by the BLM Well Information System
For COG PRODUCTION LLC, sent to the Hobbs**

Name (Printed/Typed) AMANDA AVERY

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 03/04/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____

Title _____

ate _____

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 know States any false, fictitious or fraudulent statements or representations as to any matter within its jur.

*Documents pending BLM approvals will
subsequently be reviewed and scanned.*

(Instructions on page 2)

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

UNMITTED **

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

HOBBS OCD
APR 06 2019
RECEIVED

5. Lease Serial No.
NMNM120907

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.
EIDER FEDERAL 101H

9. API Well No.
30-025-44629

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

11. Sec., T., R., M., or Block and Survey
or Area Sec 35 T24S R32E Mer NMP

12. County or Parish
LEA

13. State
NM

14. Date Spudded
08/22/2018

15. Date T.D. Reached
09/09/2018

16. Date Completed
 D & A Ready to Prod.
02/10/2019

17. Elevations (DF, KB, RT, GL)*
3522 GL

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 PRODUCTION LLC
Contact: AMANDA AVERY
E-Mail: aavery@concho.com

3. Address 2208 W MAIN STREET
ARTESIA, NM 88210
3a. Phone No. (include area code)
Ph: 575-748-6940

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
Sec 35 T24S R32E Mer NMP
At surface SWSW Lot M 240FSL 1020FWL 32.167475 N Lat, 103.650690 W Lon
Sec 35 T24S R32E Mer NMP
At top prod interval reported below SWSW Lot M 240FSL 1020FWL 32.167475 N Lat, 103.650690 W Lon
Sec 26 T24S R32E Mer NMP
At total depth NWSW Lot L 2410FSL 356FWL 32.187976 N Lat, 103.652833 W Lon

18. Total Depth: MD 16504
TVD 9217

19. Plug Back T.D.: MD 16415
TVD 9217

20. Depth Bridge Plug Set: MD 16425
TVD 9217

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 Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	54.5	0	993		800		0	
12.250	9.625 L80	40.0	0	4800		1400		0	
8.750	5.500 P110	17.0	0	16484		2555		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	8701	8691						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRINGS	9407	16400	9407 TO 16400		1170	OPEN BONE SPRINGS
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
9407 TO 16400	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
02/10/2019	02/10/2019	24	▶	580.0	776.0	2644.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
28/64	SI	750.0	▶	580	776	2644		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. SI	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 #456624 VERIFIED BY THE BLM WELL INFORMATION SYS.
** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

Documents pending BLM approvals will
subsequently be reviewed and scanned

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	905			RUSTLER	905
TOP OF SALT	1242			TOP OF SALT	1242
BOTTOM OF SALT	4590			BOTTOM OF SALT	4590
LAMAR	4814			LAMAR	4814
CHERRY CANYON	5767			CHERRY CANYON	5767
BONE SPRINGS LIME STONE	8792			BONE SPRINGS LIME STONE	8792

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 #456624 Verified by the BLM Well Information System.
For COG PRODUCTION LLC, sent to the Hobbs**

Name (please print) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE

Signature _____ (Electronic Submission) Date 03/04/2019

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 ****