

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM120907

1a. Type of Well Oil Well Gas Well Dry Other

b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.

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

3. Address: ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287
3a. Phone No. (include area code) Ph: 575-748-6940

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
At surface SWSW 210FSL 1020FWL 32.167392 N Lat, 103.650690 W Lon
At top prod interval reported below SWSW 210FSL 1020FWL 32.167392 N Lat, 103.650690 W Lon
At total depth NWSW 2400FSL 340FWL 32.187946 N Lat, 103.652886 W Lon

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

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

9. API Well No. 30-025-44628-00-S1

10. Field and Pool, or Exploratory WC025G06S253201M-UPPER BONE SP

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 05/04/2018 15. Date T.D. Reached 05/28/2018 16. Date Completed D & A Ready to Prod. 03/10/2019

17. Elevations (DF, KB, RT, GL)* 3521 GL

18. Total Depth: MD 17104 TVD 9635 19. Plug Back T.D.: MD 17016 TVD 9635 20. Depth Bridge Plug Set: MD 17016 TVD 9635

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) 3521 GL

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	1040		830		0	
12.250	9.625 L80	40.0	0	4767		1375		0	
8.750	5.500 P110	17.0	0	17089		2700		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	9164	9154						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9816	16991	9816 TO 16991		1200	OPEN
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
9816 TO 16991	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
03/10/2019	03/10/2019	24	→	476.0	814.0	1700.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	783		→	476	814	1700	1710	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	
			→						

ACCEPTED FOR RECORD
JUL 18 2019
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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

ELECTRONIC SUBMISSION #461978 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** BLM REVISED **

Reclamation Due: 9/10/2019

KG

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	902			RUSTLER	902
TOP OF SALT	1238			TOP OF SALT	1238
BASE OF SALT	4584			BASE OF SALT	4584
LAMAR	4808			LAMAR	4808
BELL CANYON	4872			BELL CANYON	4872
CHERRY CANYON	5752			CHERRY CANYON	5752
BRUSHY CANYON	7154			BRUSHY CANYON	7154
BRUSHY CANYON A	8547			BRUSHY CANYON A	8547

32. Additional remarks (include plugging procedure):
BONE SPRING LIMESTONE 8780

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 #461978 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH HAM on 07/16/2019 (19DMH0138SE)

Name (please print) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE

Signature _____ (Electronic Submission) Date 04/17/2019

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.

** REVISED **

DISTRICT I
1625 N. FRENCH DR., HOBBS, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II
811 S. FIRST ST., ARTESIA, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV
1220 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 476-3480 Fax: (505) 476-3482

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-44628	Pool Code 97784	Pool Name Wildcat; Bone Spring
Property Code 314193	Property Name EIDER FEDERAL	Well Number 301H
OGRID No. 217955	Operator Name COG PRODUCTION, LLC	Elevation 3521.3'

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	24-S	32-E		210	SOUTH	1020	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	26	24-S	32-E		2400	SOUTH	340	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.

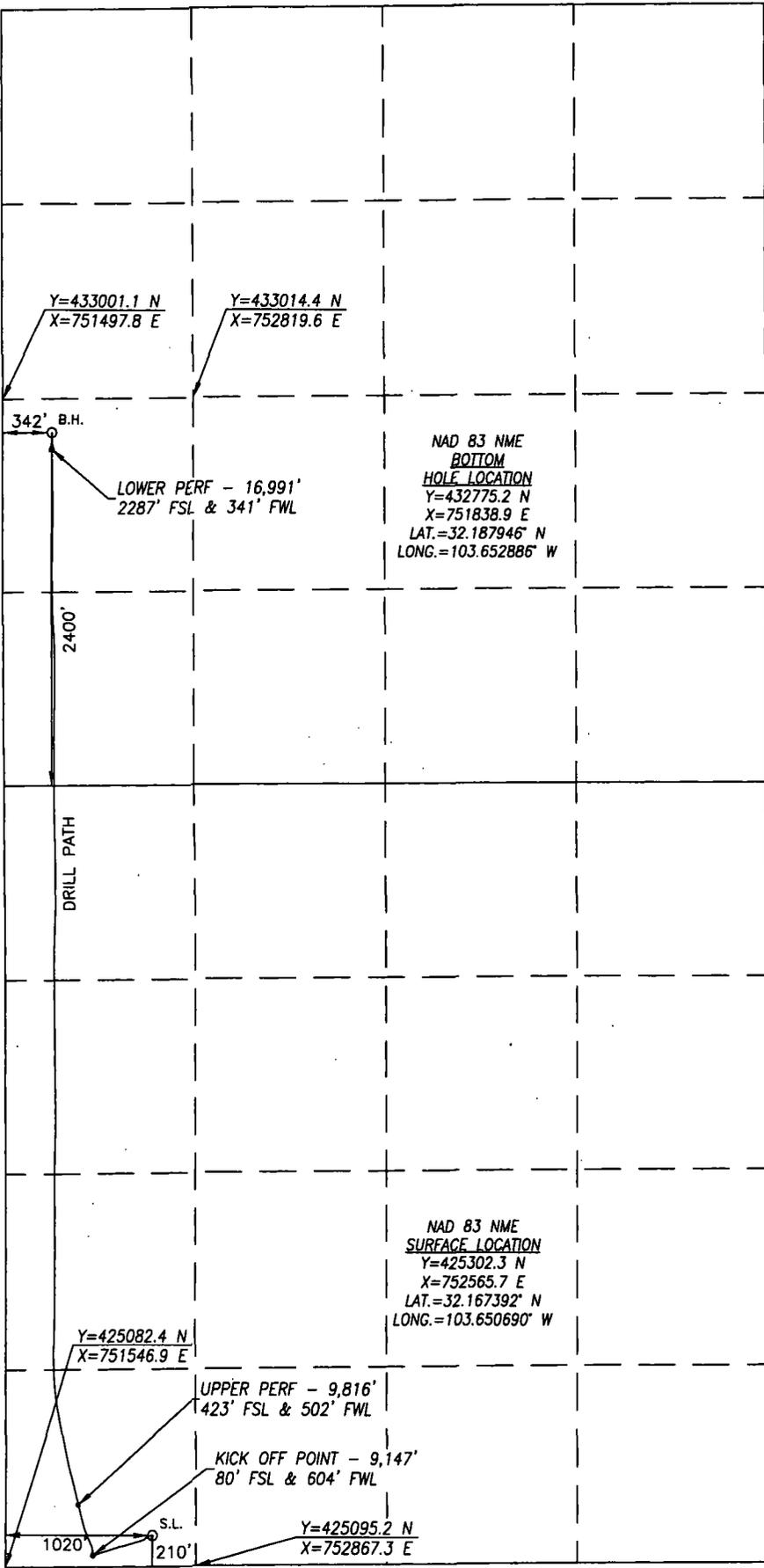
NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

SEE PAGE 2

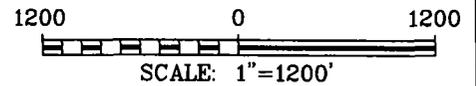
PAGE 1 OF 2

W.O. #19-163 DRAWN BY: WN

Property Code 314193	Property Name EIDER FEDERAL	Well Number 301H
OGRID No. 217955	Operator Name COG PRODUCTION, LLC	Elevation 3521.3'



BOREPATH SHOWN HEREON IS BASED ON DIRECTIONAL SURVEY REPORT PROVIDED BY COG OPERATING, LLC FOR THE EIDER FEDERAL #301H SUPPLIED TO HARCROW SURVEYING, LLC ON JANUARY 28, 2018



OPERATOR CERTIFICATION

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

4/8/19

Signature _____ Date _____

Amanda Avery

Printed Name _____

aavery@concho.com

E-mail Address _____

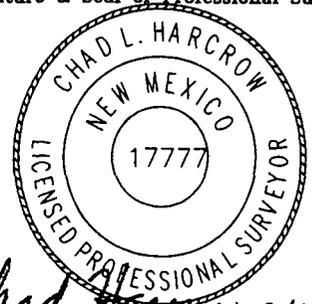
SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

AUG. 25, 2017/MAY 25, 2018

Date of Survey/Date of Geographic Survey _____

Signature & Seal of Professional Surveyor _____



Chad Harcrow 2/11/19

Certificate No. CHAD HARCROW 17777