

Submit To Appropriate District Office Two Copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 811 S. First St., Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b> <span style="font-size: 2em; font-weight: bold; color: red;">HOBBS OCD</span>	<b>Form C-105</b> Revised April 3, 2017								
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>		1. WELL API NO. 30-025-45233								
4. Reason for filing: <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.								
7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER		5. Lease Name or Unit Agreement Name Huckleberry State Com 6. Well Number: 503H								
8. Name of Operator COG Operating LLC		9. OGRID 229137								
10. Address of Operator 2208 W. Main Street Artesia, NM 88210		11. Pool name or Wildcat WC-025 G-08 S213304D; BONE SPRING								
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	B	27	21S	33E		145	North	2620	East	Lea
BH:	B	15	21S	33E		200	North	2341	East	Lea
13. Date Spudded 3/4/19	14. Date T.D. Reached 5/24/19	15. Date Rig Released 5/27/19		16. Date Completed (Ready to Produce) 11/19/19		17. Elevations (DF and RKB, RT, GR, etc.) 3744' GR				
18. Total Measured Depth of Well 21,129'		19. Plug Back Measured Depth 21,035'		20. Was Directional Survey Made? Yes		21. Type Electric and Other Logs Run None				
22. Producing Interval(s), of this completion - Top, Bottom, Name 10,942-21,010' Bone Spring										
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13 3/8"		54.5#		1851'		17 1/2"		1405 sx		
9 5/8"		40 #		5408'		12 1/4"		2910 sx		
5 1/2"		17#		21109'		8 3/4"		3900 sx		
<b>24. LINER RECORD</b>										
SIZE		TOP		BOTTOM		SACKS CEMENT		SCREEN		
<b>25. TUBING RECORD</b>										
SIZE		DEPTH SET		PACKER SET						
2 7/8"		10232'		10222' ✓						
26. Perforation record (interval, size, and number)  10,942- 21,010' (1428)						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
						DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED		
						10,942-21,010'		Acidz w/0 gal 7 1/2%; Frac with 20,415,885# sand & 20,422,164 gal fluid		
<b>28. PRODUCTION</b>										
Date First Production 12/5/19		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> ) Flowing				Well Status ( <i>Prod. or Shut-in</i> ) Producing				
Date of Test 12/5/19	Hours Tested 24	Choke Size 21/64"	Prod'n For Test Period 24 Hrs	Oil - Bbl 131	Gas - MCF 277	Water - Bbl. 3912	Gas - Oil Ratio			
Flow Tubing Press. 1500#	Casing Pressure 500#	Calculated 24-Hour Rate	Oil - Bbl. 131	Gas - MCF 277	Water - Bbl. 3912	Oil Gravity - API - ( <i>Corr.</i> )				
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> ) Sold							30. Test Witnessed By Thomas Rebenack			
31. List Attachments Surveys										
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.							33. Rig Release Date: 5/27/19			
34. If an on-site burial was used at the well, report the exact location of the on-site burial:										
			Latitude		Longitude			NAD83		
<i>I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief</i>										
Signature <i>Amanda Avery</i>			Printed Name: Amanda Avery		Title Regulatory Analyst			Date 1/16/2020		
E-mail Address: aavery@concho.com										

