

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

Submit one copy to appropriate District Office
JAN 24 2020

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 - 025-45057 | ⁵ Pool Name WC-025 G-09 S243532M; WOLFBONE | ⁶ Pool Code 98098 <i>KZ</i> |
| ⁷ Property Code 322226 | ⁸ Property Name Bonaid Federal Com | ⁹ Well Number 15H |

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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| D | 17 | 24S | 35E | | 210 | North | 1080 | 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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| M | 20 | 24S | 35E | | 200 | South | 987 | West | Lea |

| | | | | | |
|-----------------------------|--|---|-----------------------------------|------------------------------------|-------------------------------------|
| ¹² Lse Code F | ¹³ Producing Method Code F | ¹⁴ Gas Connection Date 12/20/19 | 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 | ²⁰ O/G/W |
|---------------------------------|--|---------------------|
| | Alpha Crude Connector Pipeline | O |
| 24650 | Targa Midstream Services, LP 1000 Louisiana - Ste 4700 Houston, TX 77002 | G |
| | Holly Refining and Marketing PO Box 159 Artesia, NM 88210 | |

IV. Well Completion Data

| | | | | | |
|------------------------------------|-------------------------------------|------------------------------------|-------------------------------|--|----------------------------|
| ²¹ Spud Date 3/24/19 | ²² Ready Date 12/9/19 | ²³ TD 21,799' | ²⁴ PBDT 21,575' | ²⁵ Perforations 12,052-21,615' | ²⁶ DHC, MC |
| ²⁷ Hole Size | | ²⁸ Casing & Tubing Size | | ²⁹ Depth Set | ³⁰ Sacks Cement |
| 17 1/2" | | 13 3/8" | | 944' | 1050 |
| 12 1/4" | | 9 5/8" | | 11154' | 1710 |
| 8 3/4" | | 5 1/2" | | 21784' | 3490 |
| | | 2 7/8" | | 9576' | |

V. Well Test Data

| | | | | | |
|--|---|-------------------------------------|------------------------------------|--------------------------------------|--------------------------------------|
| ³¹ Date New Oil 12/20/19 | ³² Gas Delivery Date 12/20/19 | ³³ Test Date 12/20/19 | ³⁴ Test Length 24Hrs | ³⁵ Tbg. Pressure 3475# | ³⁶ Csg. Pressure 1425# |
| ³⁷ Choke Size 27/64 | ³⁸ Oil 778 | ³⁹ Water 3088 | ⁴⁰ Gas 901 | | 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: 1/22/2020
Phone: 575-748-6962

OIL CONSERVATION DIVISION
Approved by: *P. M. [Signature]*
Title: *L.M.*
Approval Date: *2/11/2020*

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.

HOBBS OCD
JAN 24 2020

SUBMIT IN TRIPLICATE - Other instructions on page 2

RECEIVED

| | | |
|---|--|--|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. NMNM134886 |
| 2. Name of Operator COG OPERATING LLC | | 6. If Indian, Allottee or Tribe Name |
| 3a. Address 2208 W MAIN STREET ARTESIA, NM 88210 | | 7. If Unit or CA/Agreement, Name and/or No. |
| 3b. Phone No. (include area code) Ph: 575-748-6940 | | 8. Well Name and No. BONAIID FEDERAL COM 15H |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T24S R35E Mer NMP NWNW 210FNL 1080FWL 32.224207 N Lat, 103.394575 W Lon | | 9. API Well No. 30-025-45057 |
| | | 10. Field and Pool or Exploratory Area WC-025 G-09 S243532M; WB |
| | | 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 checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Deepen |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Hydraulic Fracturing |
| | <input type="checkbox"/> Production (Start/Resume) |
| | <input type="checkbox"/> Reclamation |
| | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Well Integrity |
| | <input checked="" type="checkbox"/> Other Hydraulic Fracture |
| | <input type="checkbox"/> Recomplete |
| | <input type="checkbox"/> Temporarily Abandon |
| | <input type="checkbox"/> Plug and Abandon |
| | <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.

10/22/19 Test annulus to 1500# Set CBP @ 21,710' and test csg to 11,636#. Good test. Perf 21,685-21,695'. Injection Test.
11/10/19 to 11/24/19 Perf 12,052-21,615' (1568). Acdz w/75,600 gal 7 1/2%; frac w/ 19,640,198# sand & 19,066,740gal fluid.
11/30/19 to 12/1/19 Drilled out CFP's. Clean down to PBTD @21,575'.
12/8/19 Set 2 7/8" 6.5# L-80 tbg @ 9,576' packer @ 9,566'.
12/20/19 Began flowing back & testing. Date of first production.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #500402 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs

| | |
|-----------------------------------|--------------------------|
| Name (Printed/Typed) AMANDA AVERY | Title REGULATORY ANALYST |
| Signature (Electronic Submission) | Date 01/23/2020 |

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.

(Instructions on page 2)

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

HOBBS OCD

Form 3160-4
(August 2007)

JAN 24 2020

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

WELL RECEIVED OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM134866

| | | | | | |
|---|--|--|---|--|--|
| 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: 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)* At surface NWNW Lot D 210FNL 1080FWL 32.224207 N Lat, 103.394575 W Lon At top prod interval reported below NWNW Lot D 210FNL 1080FWL 32.224207 N Lat, 103.394575 W Lon At total depth NWNW Lot D 210FNL 1080FWL 32.224207 N Lat, 103.394575 W Lon | | | 8. Lease Name and Well No. BONAIID FEDERAL COM 15H | | |
| 14. Date Spudded 03/24/2019 | | | 15. Date T.D. Reached 10/06/2019 | | |
| 16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 12/09/2019 | | | 9. API Well No. 30-025-45057 | | |
| 18. Total Depth: MD 21799 TVD 12320 | | | 19. Plug Back T.D.: MD 21575 TVD 12320 | | |
| 21. Type Electric & Other Mechanical Logs Run (Submit copy of each) | | | 20. Depth Bridge Plug Set: MD 21710 TVD 12320 | | |
| 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) | | | 17. Elevations (DF, KB, RT, GL)* 3375 GL | | |

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 | 944 | | 1050 | | 0 | |
| 12.250 | 9.625 L80 | 47.0 | 0 | 11154 | 5223 | 1710 | | 0 | |
| 8.500 | 5.500 P110 | 23.0 | 0 | 21784 | | 3490 | | 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 | 9576 | 9566 | | | | | | |

25. Producing Intervals

| Formation | Top | Bottom | Perforated Interval | Size | No. Holes | Perf. Status |
|-------------|-------|--------|---------------------|------|-----------|--------------|
| A) WOLFBONE | 12052 | 21615 | 12052 TO 21615 | | 1568 | OPEN |
| B) | | | | | | |
| C) | | | | | | |
| D) | | | | | | |

26. Perforation Record

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

| Depth Interval | Amount and Type of Material |
|----------------|-----------------------------|
| 12052 TO 21615 | SEE ATTACHED INFORMATION |
| | |
| | |

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 |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| 12/20/2019 | 12/20/2019 | 24 | ▶ | 778.0 | 901.0 | 3088.0 | | | FLOWS FROM WELL |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas:Oil Ratio | Well Status | |
| 27/64 | 3475 | 1425.0 | ▶ | 778 | 901 | 3088 | | 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 | |
| | | | ▶ | | | | | | |

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

ELECTRONIC SUBMISSION #500386 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.)
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 | 778 | | | RUSTLER | 778 |
| TOP OF SALT | 1151 | | | TOP OF SALT | 1151 |
| BOTTOM OF SALT | 4888 | | | BOTTOM OF SALT | 4888 |
| LAMAR | 5256 | | | LAMAR | 5256 |
| BELL CANYON | 5284 | | | BELL CANYON | 5284 |
| CHERRY CANYON | 6232 | | | CHERRY CANYON | 6232 |
| BRUSHY CANYON | 7677 | | | BRUSHY CANYON | 7677 |
| BONE SPRING LIMESTONE | 8997 | | | BONE SPRING LIMESTONE | 8997 |

32. Additional remarks (include plugging procedure):
 FIRST BONE SPRING 10016
 SECOND BONE SPRING 10585
 THIRD BONE SPRING 11591

33. Circle enclosed attachments:
- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (I 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 #500386 Verified by the BLM Well Information System.
 For COG OPERATING LLC, sent to the Hobbs**

Name (please print) AMANDA AVERY Title REGULATORY ANALYST

Signature (Electronic Submission) Date 01/22/2020

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 ****