

RECEIVED

MAR 11 2011

Form C-103  
October 13, 2009

Submit 1 Copy To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., 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 and Natural Resources

HOBBSDUCD

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)</p>		<p>WELL API NO. 30-025-39951</p>
<p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p>		<p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p>
<p>2. Name of Operator COG Operating LLC</p>		<p>6. State Oil &amp; Gas Lease No.</p>
<p>3. Address of Operator 2208 W. Main Street, Artesia, NM 88210</p>		<p>7. Lease Name or Unit Agreement Name Magnum Pronto State Com</p>
<p>4. Well Location Unit Letter <u>P</u> : <u>330</u> feet from the <u>South</u> line and <u>330</u> feet from the <u>East</u> line Section <u>32</u> Township <u>19S</u> Range <u>32E</u> NMPM Lea County</p>		<p>8. Well Number 4H</p>
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3535' GR</p>		<p>9. OGRID Number 229137</p>
		<p>10. Pool name or Wildcat Lusk; Bone Spring, South</p>

## 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Completion Operations ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

2/8/11 to 2/12/11 MIRU WSU. Tested csg to 3500#. Tag & drill out DVT. Circulate well clean. Tagged PBTD @ 13701'.  
2/25/11 to 2/26/11 Perforate Bone Spring 9400-13630'. Acdz w/25883 gal 15% acid; Frac w/2951264# sand & 2533895 gal fluid.  
3/1/11 Drill out all frac plugs. Start flowing back & testing.

No tubing in hole

Spud Date:

12/29/10

Rig Release Date:

1/23/11

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE: Regulatory Analyst

DATE: 3/7/11

Type or print name: Stormi Davis

E-mail address: sdavis@conchoresources.com

PHONE: (575) 748-6946

## For State Use Only

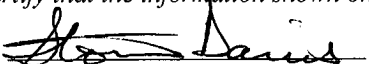
APPROVED BY:

TITLE

PETROLEUM ENGINEER

DATE APR 01 2011

Conditions of Approval (if any):

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>RECEIVED</b> <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>		<b>Form C-105</b> July 17, 2008																		
		<b>MAR 11 2011</b> <b>HOBBS</b>																				
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>																						
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)				5. Lease Name or Unit Agreement Name <b>Magnum Pronto State Com</b>  6. Well Number:  <b>4H</b>																		
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																						
8. Name of Operator <b>COG Operating LLC</b>				9. OGRID <b>229137</b>																		
10. Address of Operator <b>2208 W. Main Street</b> <b>Artesia, NM 88210</b>				11. Pool name or Wildcat  <b>Lusk; Bone Spring, South</b>																		
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County												
Surface:	P	32	19S	32E	<b>4</b>	330	South	330	East	Lea												
BH:	A	32	19S	32E		<b>3224958</b>	North <b>5</b>	511	East	Lea												
13. Date Spudded 12/29/10	14. Date T.D. Reached 1/22/11	15. Date Rig Released 1/23/11		16. Date Completed (Ready to Produce) 3/1/11		17. Elevations (DF and RKB, RT, GR, etc.) 3535' GR																
18. Total Measured Depth of Well 13740'		19. Plug Back Measured Depth 13701'		20. Was Directional Survey Made? Yes		21. Type Electric and Other Logs Run DLL, DSN																
22. Producing Interval(s), of this completion - Top, Bottom, Name 9400-13630' 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#		925'		17 1/2"		825 sx		0												
9 5/8"		36#, 40#		4010'		12 1/4"		1550 sx		0												
5 1/2"		17#		13740'		7 7/8"		1575 sx (TOC@1154-TS)		0												
24. LINER RECORD						25. TUBING RECORD																
SIZE	TOP	BOTTOM	SACKS CMT	SCREEN		SIZE	DEPTH SET		PACKER SET													
26. Perforation record (interval, size, and number)  <b>9400-13630'</b>						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td>9400-13630'</td> <td>Acid w/25883 gal 15%; Frac w/2951264# sand &amp; 2533895 gal fluid</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>					DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	9400-13630'	Acid w/25883 gal 15%; Frac w/2951264# sand & 2533895 gal fluid								
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9400-13630'	Acid w/25883 gal 15%; Frac w/2951264# sand & 2533895 gal fluid																					
<b>28. PRODUCTION</b>																						
Date First Production 3/2/11		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing																
Date of Test 3/8/11	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 1417	Gas - MCF 1381	Water - Bbl. 1530	Gas - Oil Ratio															
Flow Tubing Press.	Casing Pressure 550#	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)																
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Will be Sold						30. Test Witnessed By Tito Aguirre																
31. List Attachments Logs, Deviation Report, Directional Surveys																						
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.																						
33. If an on-site burial was used at the well, report the exact location of the on-site burial:																						
Latitude			Longitude			NAD 1927 1983																
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																						
Signature: 			Printed Name: Stormi Davis		Title: Regulatory Analyst			Date: 3/9/11														
E-mail Address: sdavis@conchoresources.com																						

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt 1285'	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt 2380'	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates 2444'	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Oztzte
T. Paddock	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinebry	T. Rustler 928'	T. Dakota	
T. Tubb	T. Delaware 4500'	T. Morrison	
T. Drinkard	T. Yeso	T. Todilto	
T. Abo	T. Cherry Canyon	T. Entrada	
T. Wolfcamp	T. Brushy Canyon	T. Wingate	
T. Penn	T. Bone Spring 7356'	T. Chinle	
T. Cisco-Canyon	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....  
No. 2, from.....to.....  
No. 3, from.....to.....  
No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....  
 No. 2, from.....to.....feet.....  
 No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology