

~~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

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address EOG Resources, Inc. P.O. Box 2267 Midland, TX 79702		<sup>2</sup> OGRID Number 7377
		<sup>3</sup> Reason for Filing Code/ Effective Date NW 10/2016
<sup>4</sup> API Number 30 - 0 15-42264	<sup>5</sup> Pool Name Jennings; Bone Spring, West	<sup>6</sup> Pool Code 97860
<sup>7</sup> Property Code 38727	<sup>8</sup> Property Name Ross Draw 8 Fed	<sup>9</sup> Well Number 7H

II. <sup>10</sup> Surface Location

UL or lot no. D	Section 8	Township 26S	Range 31E	Lot Idn	Feet from the 333	North/South Line North	Feet from the 553	East/West line West	County Eddy
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<sup>11</sup> Bottom Hole Location

UL or lot no. M	Section 8	Township 26S	Range 31E	Lot Idn	Feet from the 229	North/South line South	Feet from the 643	East/West line West	County Eddy
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code Gas Lift	<sup>14</sup> Gas Connection Date 10/10/16	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
7377	EOG Resources, Inc.	Oil
151618	Enterprise Field Services LLC	Gas
<div>NM OIL CONSERVATION ARTESIA DISTRICT NOV 21 2016 RECEIVED</div>		

IV. Well Completion Data

<sup>21</sup> Spud Date 5/22/15	<sup>22</sup> Ready Date 10/10/16	<sup>23</sup> TD 13100M - 8359V	<sup>24</sup> PBTB 12989	<sup>25</sup> Perforations 8628 - 12989'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17-1/2	13-3/8	1500	800 C		
12-1/4	9-5/8	3875	825 C		
8-3/4	5-1/2	13100	475 C, 1480 H		

V. Well Test Data

<sup>31</sup> Date New Oil 10/10/16	<sup>32</sup> Gas Delivery Date 10/10/16	<sup>33</sup> Test Date 11/13/16	<sup>34</sup> Test Length 24	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure 797
<sup>37</sup> Choke Size Open	<sup>38</sup> Oil 1390	<sup>39</sup> Water 4223	<sup>40</sup> Gas 9536		<sup>41</sup> Test Method Flowing

<sup>42</sup> 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:

Printed name:  
Stan Wagner

Title:  
Regulatory Specialist

E-mail Address:

Date:  
11/14/16

Phone: --  
432-686-3689

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Pending BLM approvals will  
subsequently be reviewed  
and scanned

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM0438001
2. Name of Operator EOG RESOURCES, INC.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 2267 MIDLAND, TX 79702		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-686-3689		8. Well Name and No. ROSS DRAW 8 FED 7H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 8 T26S R31E NWNW 333FNL 553FWL		9. API Well No. 30-015-42264
		10. Field and Pool, or Exploratory JENNINGS BONE SPRING WEST
		11. County or Parish, and State EDDY COUNTY, NM

12. CHECK 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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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	Production Start-up
	<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 recomple 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

6/25/15 Ran CBL, found TOC at 2070'. Perform pre-frac casing test to a max pressure of 8526 psi.  
9/22/16 MIRU for completion. Begin 22 stage completion.  
9/25/16 Finish perforating and frac.  
Perforated 8628-12989', 0.35", 1068 holes.  
Frac w/ 648 bbls acid; 7,700,743 lbs proppant; 130,018 bbls load water.  
10/01/16 RIH to drill out plugs and clean out well.  
10/02/16 Finish drill and clean out.  
10/07/16 RIH w/ 5-1/2" production packer set at 8135'.  
10/08/16 RIH w/ 2-7/8" production tubing and gas lift assembly set at 8171'. Well shut-in.  
10/10/16 Opened well to flowback. First production.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #354973 verified by the BLM Well Information System For EOG RESOURCES, INC., sent to the Carlsbad</b>	
Name (Printed/Typed) STAN WAGNER	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 10/17/2016

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____
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 _____

Pending BLM approvals will  
subsequently be reviewed  
and scanned

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and w. States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Department or agency of the United

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

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.**5. Lease Serial No.  
NMNM0438001

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**8. Well Name and No.  
ROSS DRAW 8 FED 7H9. API Well No.  
30-015-4226410. Field and Pool, or Exploratory  
JENNINGS BONE SPRING WEST11. County or Parish, and State  
EDDY COUNTY, NM1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator  
EOG RESOURCES, INC. Contact: STAN WAGNER  
E-Mail: stan\_wagner@eogresources.com3a. Address  
P.O. BOX 2267  
MIDLAND, TX 797023b. Phone No. (include area code)  
Ph: 432-686-36894. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 8 T26S R31E Mer NMP NWNW 333FNL 553FWL

## 12. CHECK 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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 Workover Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recompleate 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

10/23/16 RIH and unset packer. POOH and lay down 2-7/8" production tubing and packer.

10/24/16 RIH to clean out fill w/ 2-3/8" coil tubing. Clean out sand.

Flowback well.

11/05/16 RIH to clean out well w/ 2-3/8" coil tubing. Clean out sand.

Jet hole w/ nitrogen.

11/08/16 Returned well to production.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

NOV 21 2016

RECEIVED

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

Electronic Submission #357847 verified by the BLM Well Information System  
For EOG RESOURCES, INC., sent to the Carlsbad

Name (Printed/Typed) STAN WAGNER

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 11/14/2016

THIS SPACE FOR FEDERAL OR STATE OFFICIAL USE

Approved By

Title

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

Pending BLM approvals will  
subsequently be reviewed  
and scanned

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.

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

# NM OIL CONSERVATION

ARTESIA DISTRICT

NOV 21 2016

Form 3160-4  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**RECEIVED**

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

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.  
NMNM0438001

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 EOG RESOURCES, INC. Contact: STAN WAGNER E-Mail: stan_wagner@eogresources.com			8. Lease Name and Well No. ROSS DRAW 8 FED 7H		
3. Address P.O. BOX 2267 MIDLAND, TX 79702			9. API Well No. 30-015-42264		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 8 T26S R31E Mer NMP At surface NWNW 333FNL 553FWL  At top prod interval reported below Sec 8 T26S R31E Mer NMP At total depth SWSW 230FSL 620FWL			10. Field and Pool, or Exploratory JENNINGS BONE SPRING WEST 11. Sec., T., R., M., or Block and Survey or Area Sec 8 T26S R31E Mer NMP 12. County or Parish EDDY 13. State NM		
14. Date Spudded 05/22/2015		15. Date T.D. Reached 05/31/2015		16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 10/10/2016	
18. Total Depth: MD 13100 TVD 8359		19. Plug Back T.D.: MD 12989 TVD		20. Depth Bridge Plug Set: MD TVD	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE				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)	

### 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	1500		800		0	
12.250	9.625 J55	40.0	0	3875		825		0	
8.750	5.500 P110	20.0	0	13100		1955		2070	

### 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

### 25. Producing Intervals

### 26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING SHALE	8058		8628 TO 12989	0.350	1068	PRODUCING
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
8628 TO 12989	648 BBLs ACID; 7,700,743 LBS PROPPANT; 130,018 BBLs LOAD WATER

### 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
10/10/2016	11/13/2016	24	→	1390.0	9536.0	4223.0	47.0		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	
OPEN	SI	797.0	→				3899	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
			→					
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Sta
			→					

Pending BLM approvals will subsequently be reviewed and scanned

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

ELECTRONIC SUBMISSION #357854 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	1402	3821	ANHYDRITE	RUSTLER	1402
SALT	1706		SALT	BELL CANYON	4058
LAMAR	4021		LIMESTONE	CHERRY CANYON	4975
BELL CANYON	4058		SANDSTONE	BRUSHY CANYON	6261
CHERRY CANYON	4975		SANDSTONE	BONE SPRING	7971
BRUSHY CANYON	6261		SANDSTONE	LEONARD SHALE	8058
BONE SPRING LIME	7971		LIMESTONE		
LEONARD SHALE	8058		SHALE		

## 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 #357854 Verified by the BLM Well Information System.  
For EOG RESOURCES, INC., sent to the Carlsbad

Name (please print) STAN WAGNER

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 11/14/2016

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 \*\***