

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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.*5. Lease Serial No.  
NMLC029338B

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
KIRK FEDERAL COM 1H9. API Well No.  
30-015-4566010. Field and Pool or Exploratory Area  
LOCO HILLS; GLORIETA-YESO11. County or Parish, State  
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator  
EOG RESOURCES INC.Contact: TINA HUERTA  
E-Mail: tina\_huerta@eogresources.com3a. Address  
104 SOUTH FOURTH STREET  
ARTESIA, NM 882103b. Phone No. (include area code)  
Ph: 575-748-41684. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 12 T17S R30E SWNW 2079FNL 572FWL**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 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"/> Hydraulic Fracturing | <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       |                                           |
|                                                       | <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 recompleat 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 recompleat 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.

Notice of H2S encountered.

Attached is the ROE and Gas Analysis reports.  
Operations have relayed there are no public facilities/roads with ROE.

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

Electronic Submission #485525 verified by the BLM Well Information System  
For EOG RESOURCES INC., sent to the Carlsbad

Name (Printed/Typed) TINA HUERTA

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 09/27/2019

**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 \*\***



## **H2S RADIUS OF EXPOSURE**

**EOG Resources INC.**

### **Kirk #1H**

H2S Concentration - PPM – 300

MCF/Day – 766

500 PPM Radius of Exposure – 18ft.

100 PPM Radius of Exposure - 40ft.

Created by Safety Consultant Nicholas Hughes on August 29, 2019

## Atchafalaya Measurement, Inc.

416 East Main Street Artesia, NM 88210

575-746-3481

## Inficon Micro GC Fusion F08904 R03RR2

|                           | Sample Information       |
|---------------------------|--------------------------|
| Sample Name               | EOG_Kirk 1H_GC1-61819-01 |
| Station Number            | ART80202                 |
| Lease Name                | Kirk 1H                  |
| Analysis For              | EOG Resources            |
| Producer                  | EOG Resources            |
| Field Name                | Dagger Draw              |
| County/State              | Eddy,NM                  |
| Frequency/Spot Sample     | Spot                     |
| Sampling Method           | Fill Empty               |
| Sample Deg F              | N/A                      |
| Atmos Deg F               | N?A                      |
| Flow Rate                 | N/A                      |
| Line PSIG                 | 88.1                     |
| Date/Time Sampled         | 6-17-19                  |
| Cylinder Number           | N/A                      |
| Cylinder Clean Date       | N/A                      |
| Sampled By                | George Flores            |
| Analysis By               | Pat Silvas               |
| Verified/Calibration Date | 6-17-19                  |
| Report Date               | 2019-06-18 09:15:17      |

## Component Results

| Component Name | Ret. Time | Peak Area | Norm%     | PPMV        | GPM (Dry)<br>(Gal. / 1000 cu.ft.) |
|----------------|-----------|-----------|-----------|-------------|-----------------------------------|
| Nitrogen       | 22.700    | 21981.8   | 4.33703   | 43370.300   | 0.000                             |
| H2S            | 46.000    | 0.0       | 0.00060   | 6.000       | 0.000                             |
| Methane        | 23.540    | 263322.8  | 66.80432  | 668043.200  | 0.000                             |
| Carbon Dioxide | 27.660    | 2502.3    | 0.41368   | 4136.800    | 0.000                             |
| Ethane         | 36.860    | 100967.2  | 15.31807  | 153180.700  | 4.113                             |
| Propane        | 77.960    | 76218.7   | 8.61441   | 86144.100   | 2.383                             |
| i-butane       | 28.760    | 63885.7   | 0.93869   | 9386.900    | 0.308                             |
| n-Butane       | 30.320    | 161701.8  | 2.28921   | 22892.100   | 0.725                             |
| i-pentane      | 35.400    | 35511.0   | 0.42649   | 4264.900    | 0.157                             |
| n-Pentane      | 37.480    | 37211.7   | 0.43501   | 4350.100    | 0.158                             |
| Hexanes Plus   | 120.000   | 36875.0   | 0.42249   | 4224.900    | 0.184                             |
| Total:         |           |           | 100.00000 | 1000000.000 | 8.028                             |

## Results Summary

| Result                                   | Dry      | Sat. (Base) |
|------------------------------------------|----------|-------------|
| Total Raw Mole% (Dry)                    | 99.75985 |             |
| Pressure Base (psia)                     | 14.730   |             |
| Temperature Base                         | 60.00    |             |
| Gross Heating Value (BTU / Ideal cu.ft.) | 1327.0   | 1303.9      |
| Gross Heating Value (BTU / Real cu.ft.)  | 1332.7   | 1310.1      |
| Relative Density (G), Ideal              | 0.8083   | 0.8050      |
| Relative Density (G), Real               | 0.8114   | 0.8085      |
| Compressibility (Z) Factor               | 0.9957   | 0.9953      |

## Spot Values > Yest. Vol

 Fields 1/9

Recent 50

| <u>Well</u> | <u>MCF</u> |
|-------------|------------|
| Kirk 1H     | 348        |
| Kirk 2H     | 349        |
| Kirk 3H     | 350        |



07/20/2023 06:05:25 PM

Yest. Vol (MCF)

 Yest. Vol (MCF): 1,046.74



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**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

DEFINITIONS

Action 243128

DEFINITIONS

|                                                                             |                                                        |
|-----------------------------------------------------------------------------|--------------------------------------------------------|
| Operator:<br>MR NM Operating LLC<br>5950 Berkshire Lane<br>Dallas, TX 75225 | OGRID:<br>330506                                       |
|                                                                             | Action Number:<br>243128                               |
|                                                                             | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

DEFINITIONS

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| For the sake of brevity and completeness, please allow for the following in all groups of questions and for the rest of this application: <ul style="list-style-type: none"><li>• this application's operator, hereinafter "this operator";</li><li>• venting and/or flaring, hereinafter "vent or flare";</li><li>• any notification or report(s) of the C-129 form family, hereinafter "any C-129 forms";</li><li>• the statements in (and/or attached to) this, hereinafter "the statements in this";</li><li>• and the past tense will be used in lieu of mixed past/present tense questions and statements.</li></ul> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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QUESTIONS

Action 243128

**QUESTIONS**

|                                                                             |                                                        |
|-----------------------------------------------------------------------------|--------------------------------------------------------|
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|                                                                             | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

**QUESTIONS**

|                                                                                                                                                                                            |                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| <b>Prerequisites</b><br>Any messages presented in this section, will prevent submission of this application. Please resolve these issues before continuing with the rest of the questions. |                                       |
| Incident Well                                                                                                                                                                              | [30-015-45660] KIRK FEDERAL COM #001H |
| Incident Facility                                                                                                                                                                          | Unavailable.                          |

|                                                                                                                                                                                                                                                                                            |                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| <b>Determination of Reporting Requirements</b><br>Answer all questions that apply. The Reason(s) statements are calculated based on your answers and may provide additional guidance.                                                                                                      |                                                   |
| Was this vent or flare caused by an emergency or malfunction                                                                                                                                                                                                                               | No                                                |
| Did this vent or flare last eight hours or more cumulatively within any 24-hour period from a single event                                                                                                                                                                                 | Yes                                               |
| Is this considered a submission for a vent or flare event                                                                                                                                                                                                                                  | Yes, minor venting and/or flaring of natural gas. |
| An operator shall file a form C-141 instead of a form C-129 for a release that, includes liquid during venting and/or flaring that is or may be a major or minor release under 19.15.29.7 NMAC.                                                                                            |                                                   |
| Was there at least 50 MCF of natural gas vented and/or flared during this event                                                                                                                                                                                                            | Yes                                               |
| Did this vent or flare result in the release of <b>ANY</b> liquids (not fully and/or completely flared) that reached (or has a chance of reaching) the ground, a surface, a watercourse, or otherwise, with reasonable probability, endanger public health, the environment or fresh water | No                                                |
| Was the vent or flare within an incorporated municipal boundary or within 300 feet from an occupied permanent residence, school, hospital, institution or church in existence                                                                                                              | No                                                |

|                                                           |               |
|-----------------------------------------------------------|---------------|
| <b>Equipment Involved</b>                                 |               |
| Primary Equipment Involved                                | Not answered. |
| Additional details for Equipment Involved. Please specify | Not answered. |

|                                                                                                                                                             |               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| <b>Representative Compositional Analysis of Vented or Flared Natural Gas</b><br>Please provide the mole percent for the percentage questions in this group. |               |
| Methane (CH4) percentage                                                                                                                                    | 67            |
| Nitrogen (N2) percentage, if greater than one percent                                                                                                       | 4             |
| Hydrogen Sulfide (H2S) PPM, rounded up                                                                                                                      | 0             |
| Carbon Dioxide (CO2) percentage, if greater than one percent                                                                                                | 0             |
| Oxygen (O2) percentage, if greater than one percent                                                                                                         | 0             |
| If you are venting and/or flaring because of Pipeline Specification, please provide the required specifications for each gas.                               |               |
| Methane (CH4) percentage quality requirement                                                                                                                | Not answered. |
| Nitrogen (N2) percentage quality requirement                                                                                                                | Not answered. |
| Hydrogen Sulfide (H2S) PPM quality requirement                                                                                                              | Not answered. |
| Carbon Dioxide (CO2) percentage quality requirement                                                                                                         | Not answered. |
| Oxygen (O2) percentage quality requirement                                                                                                                  | Not answered. |

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QUESTIONS, Page 2

Action 243128

**QUESTIONS (continued)**

|                                                                             |                                                        |
|-----------------------------------------------------------------------------|--------------------------------------------------------|
| Operator:<br>MR NM Operating LLC<br>5950 Berkshire Lane<br>Dallas, TX 75225 | OGRID:<br>330506                                       |
|                                                                             | Action Number:<br>243128                               |
|                                                                             | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

**QUESTIONS**

| Date(s) and Time(s)                            |            |
|------------------------------------------------|------------|
| Date vent or flare was discovered or commenced | 07/19/2023 |
| Time vent or flare was discovered or commenced | 12:01 AM   |
| Time vent or flare was terminated              | 11:59 PM   |
| Cumulative hours during this event             | 24         |

| Measured or Estimated Volume of Vented or Flared Natural Gas              |                                                                                                                            |
|---------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Natural Gas Vented (Mcf) Details                                          | Not answered.                                                                                                              |
| Natural Gas Flared (Mcf) Details                                          | Cause: Midstream Scheduled Maintenance   Well   Natural Gas Flared   Released: 348 Mcf   Recovered: 0 Mcf   Lost: 348 Mcf. |
| Other Released Details                                                    | Not answered.                                                                                                              |
| Additional details for Measured or Estimated Volume(s). Please specify    | Not answered.                                                                                                              |
| Is this a gas only submission (i.e. only significant Mcf values reported) | Yes, according to supplied volumes this appears to be a "gas only" report.                                                 |

| Venting or Flaring Resulting from Downstream Activity             |                        |
|-------------------------------------------------------------------|------------------------|
| Was this vent or flare a result of downstream activity            | Yes                    |
| Was notification of downstream activity received by this operator | Yes                    |
| Downstream OGRID that should have notified this operator          | [270047] DCP MIDSTREAM |
| Date notified of downstream activity requiring this vent or flare | 07/13/2023             |
| Time notified of downstream activity requiring this vent or flare | 10:15 PM               |

| Steps and Actions to Prevent Waste                                                                                               |                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| For this event, this operator could not have reasonably anticipated the current event and it was beyond this operator's control. | True                                                                    |
| Please explain reason for why this event was beyond this operator's control                                                      | DCP had the line shut-in due to maintenance                             |
| Steps taken to limit the duration and magnitude of vent or flare                                                                 | Worked with DCP to expedite the shut-in                                 |
| Corrective actions taken to eliminate the cause and reoccurrence of vent or flare                                                | Continue to work with DCP to have alternative routes for gas deliveries |



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ACKNOWLEDGMENTS

Action 243128

**ACKNOWLEDGMENTS**

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|                                                                             | Action Number:<br>243128                               |
|                                                                             | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

**ACKNOWLEDGMENTS**

|                                     |                                                                                                                                                                                                                                                                                                                           |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> | I acknowledge that I am authorized to submit a <i>Venting and/or Flaring</i> (C-129) report on behalf of this operator and understand that this report can be a <b>complete</b> C-129 submission per 19.15.27.8 and 19.15.28.8 NMAC.                                                                                      |
| <input checked="" type="checkbox"/> | I acknowledge that upon submitting this application, I will be creating a new incident file (assigned to this operator) to track any C-129 forms, pursuant to 19.15.27.7 and 19.15.28.8 NMAC and understand that this submission meets the notification requirements of Paragraph (1) of Subsection G and F respectively. |
| <input checked="" type="checkbox"/> | I hereby certify the statements in this report are true and correct to the best of my knowledge and acknowledge that any false statement may be subject to civil and criminal penalties under the Oil and Gas Act.                                                                                                        |
| <input checked="" type="checkbox"/> | I acknowledge that the acceptance of any C-129 forms by the OCD does not relieve this operator of liability should their operations have failed to adequately investigate, report, and remediate contamination that poses a threat to groundwater, surface water, human health, or the environment.                       |
| <input checked="" type="checkbox"/> | I acknowledge that OCD acceptance of any C-129 forms does not relieve this operator of responsibility for compliance with any other applicable federal, state, or local laws and/or regulations.                                                                                                                          |

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CONDITIONS  
  
Action 243128

CONDITIONS

|                                                                             |                                                        |
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|                                                                             | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

CONDITIONS

| Created By  | Condition                                                                                                                                                                          | Condition Date |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| blake_mrnsm | If the information provided in this report requires an amendment, submit a [C-129] Amend Venting and/or Flaring Incident (C-129A), utilizing your incident number from this event. | 7/21/2023      |