

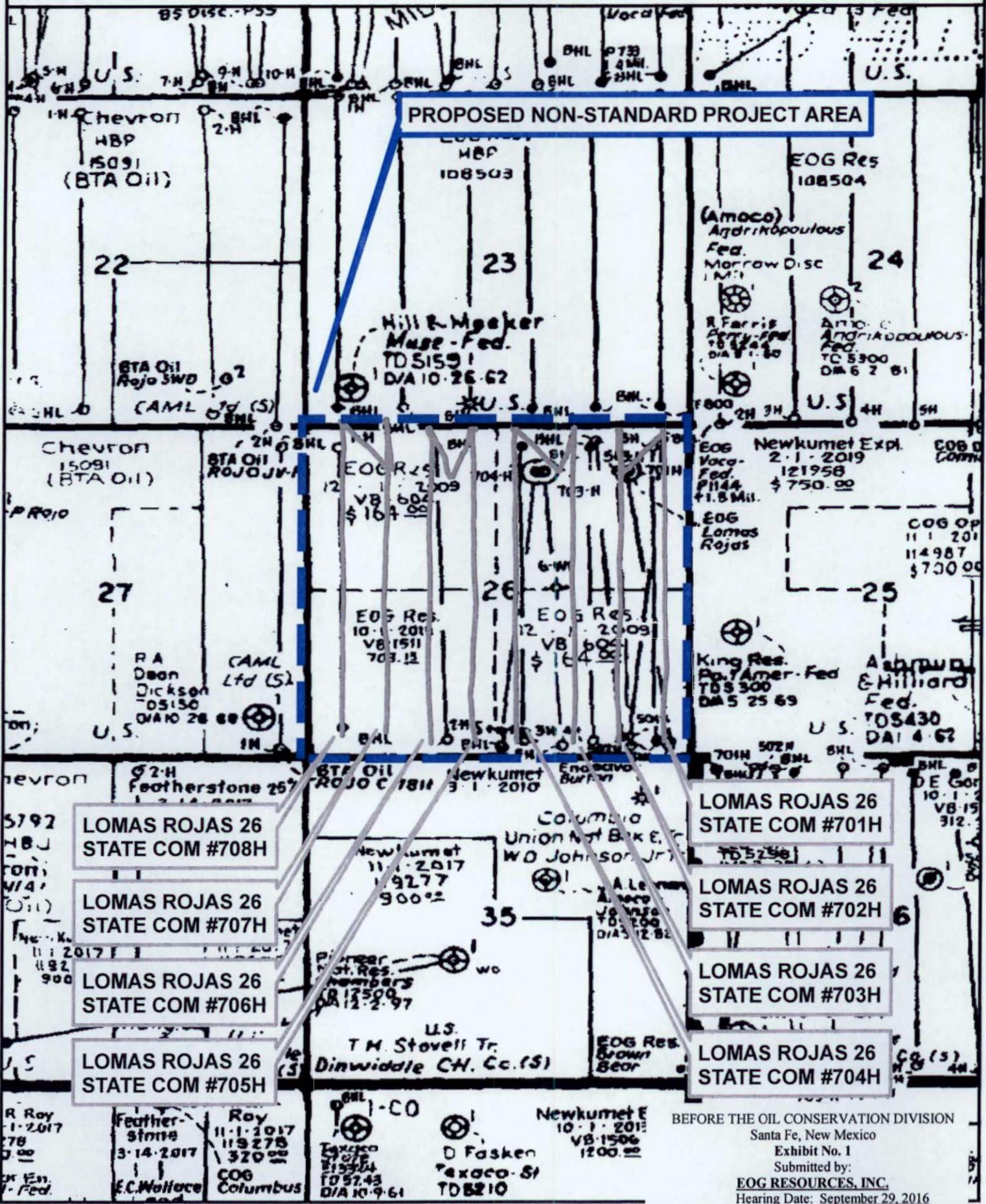


## **Lomas Rojas Development Area**

**CASE NO. 15555**

LOMAS ROJAS NON-STANDARD PROJECT AREA

SECTION 26, T25S, R33E, N.M.P.M., LEA COUNTY, NEW MEXICO - WOLFCAMP FORMATION



PROPOSED NON-STANDARD PROJECT AREA

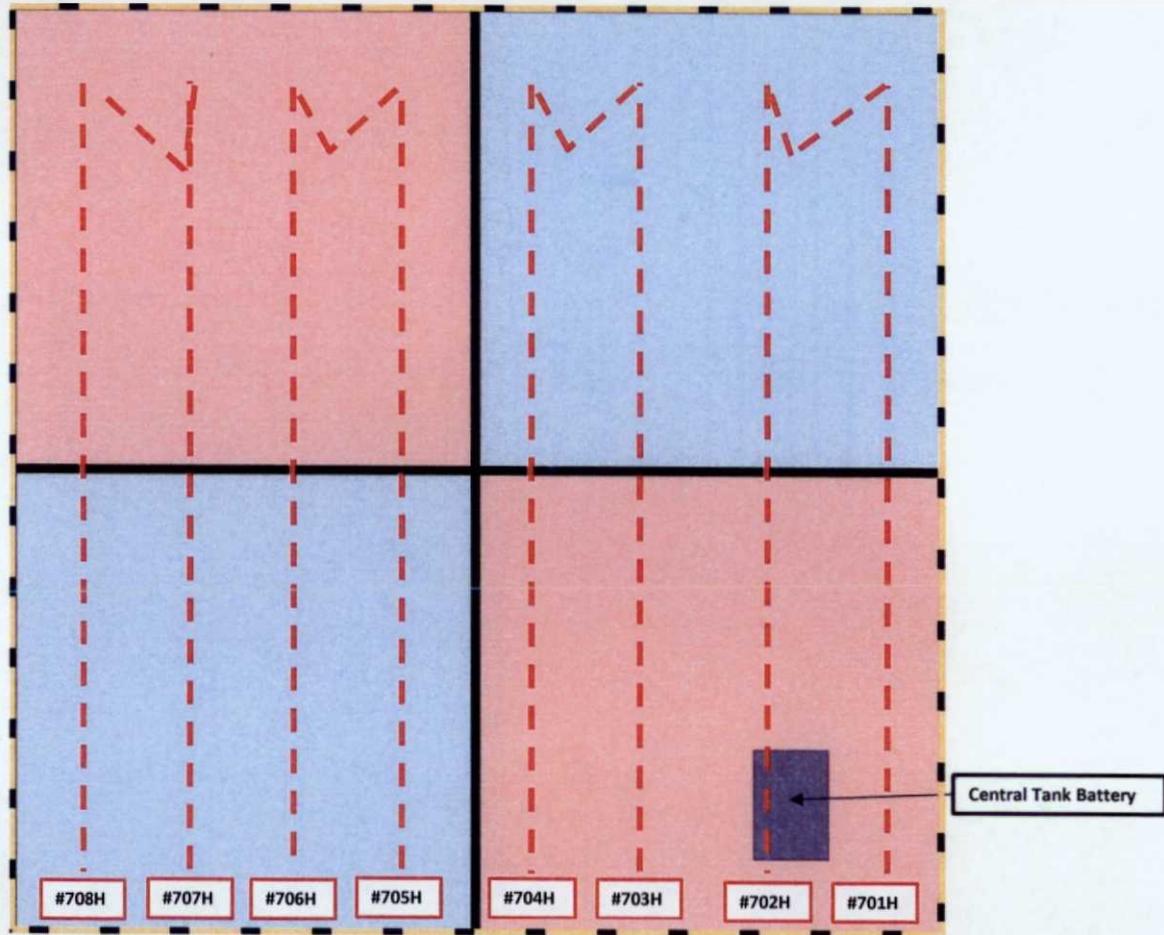
- LOMAS ROJAS 26 STATE COM #708H
- LOMAS ROJAS 26 STATE COM #707H
- LOMAS ROJAS 26 STATE COM #706H
- LOMAS ROJAS 26 STATE COM #705H

- LOMAS ROJAS 26 STATE COM #701H
- LOMAS ROJAS 26 STATE COM #702H
- LOMAS ROJAS 26 STATE COM #703H
- LOMAS ROJAS 26 STATE COM #704H

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 1  
Submitted by:  
**EOG RESOURCES, INC.**  
Hearing Date: September 29, 2016

LOMAS ROJAS CTB LOCATION SECTION 26, T25S, R33E, LEA COUNTY, NM

-  VB-0604-0001
-  VB-1511-0001
-  Proposed Non-Standard Project Area



BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 2  
Submitted by:  
**EOG RESOURCES, INC.**  
Hearing Date: September 29, 2016

District I  
1625 N French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax (575) 393-0720  
District II  
811 S First St., Artesia, NM 88210  
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District III  
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Phone: (505) 334-6178 Fax (505) 334-6170  
District IV  
1220 S St. Francis Dr., Santa Fe, NM 87505  
Phone (505) 476-3460 Fax (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources  
Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

JCD

FORM C-102

Revised August 1, 2011

Submit one copy to appropriate

District Office

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AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-42568		Pool Code 98094	Pool Name WC-025 G-09 S253336D; Upper Wolfcamp
Property Code 37858	Property Name LOMAS ROJAS 26 STATE COM		Well Number #701H
OGRID No. 7377	Operator Name EOG RESOURCES, INC.		Elevation 3336'

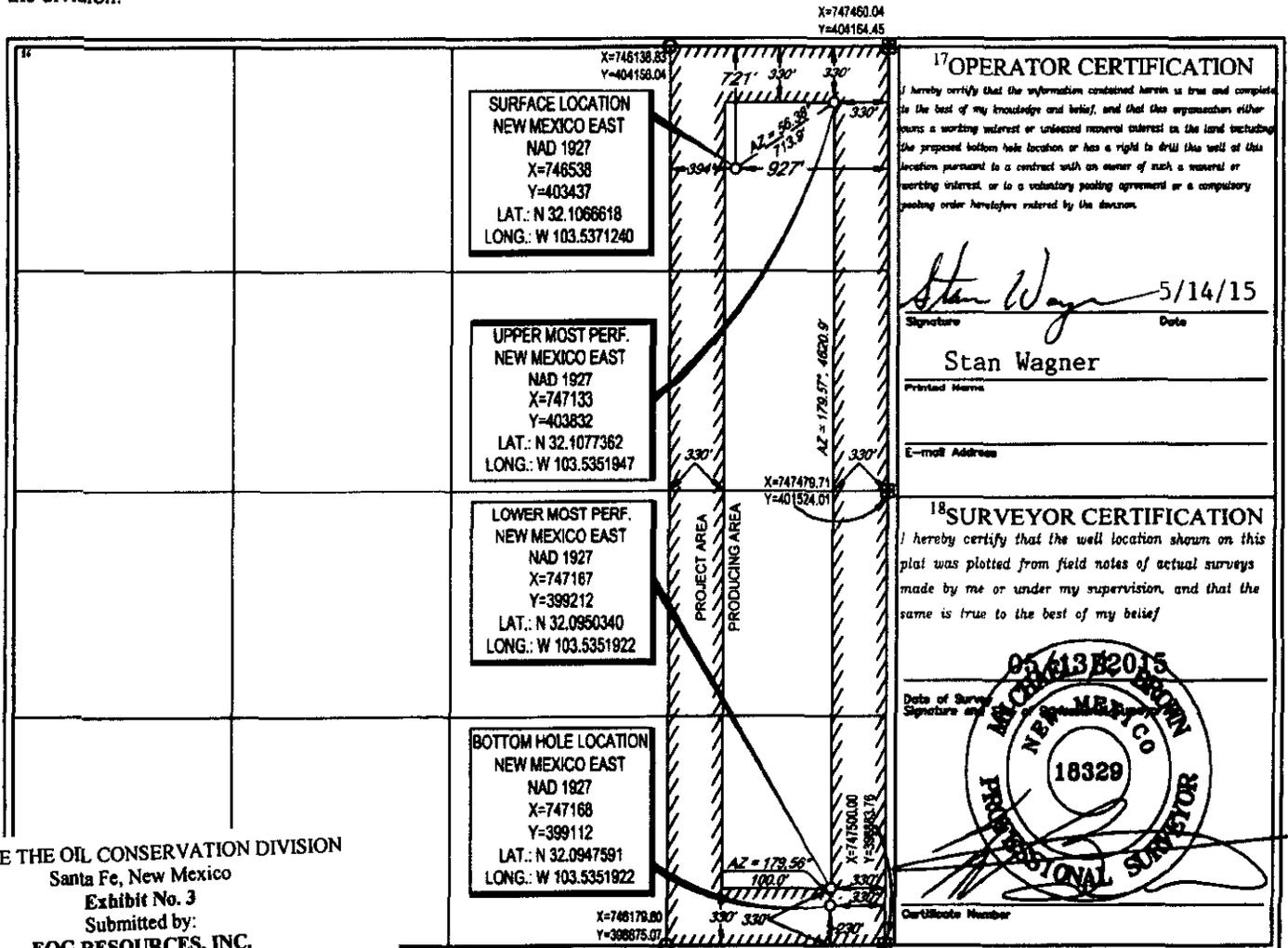
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	26	25-S	33-E	-	721'	NORTH	927'	EAST	LEA

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	26	25-S	33-E	-	268	SOUTH	333	EAST	LEA

Dedicated Acres 160.00	Joint or Infill	Consolidation Code	Order No.
---------------------------	-----------------	--------------------	-----------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that the operator either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

*Stan Wagner* 5/14/15  
Signature Date

Stan Wagner  
Printed Name

E-mail Address

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

05/13/2015  
Date of Survey  
Signature and Seal

18329  
Professional Surveyor  
Seal of the State of New Mexico  
Our Utterance Number

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 3  
Submitted by:  
EOG RESOURCES, INC.  
Hearing Date: September 29, 2016

*CYF*

# HOBBS OCD

FORM C-102

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

District II  
811 S. First St., Artesia, NM 88210  
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Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources  
Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

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Submit one copy to appropriate  
District Office

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AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-42567		<sup>2</sup> Pool Code 98094		<sup>3</sup> Pool Name WC-025 G-09 S253336D; Upper Wolfcamp	
<sup>4</sup> Property Code 37858		<sup>5</sup> Property Name LOMAS ROJAS 28 STATE COM			<sup>6</sup> Well Number #702H
<sup>7</sup> OGRID No. 7377		<sup>8</sup> Operator Name EOG RESOURCES, INC.			<sup>9</sup> Elevation 3336'

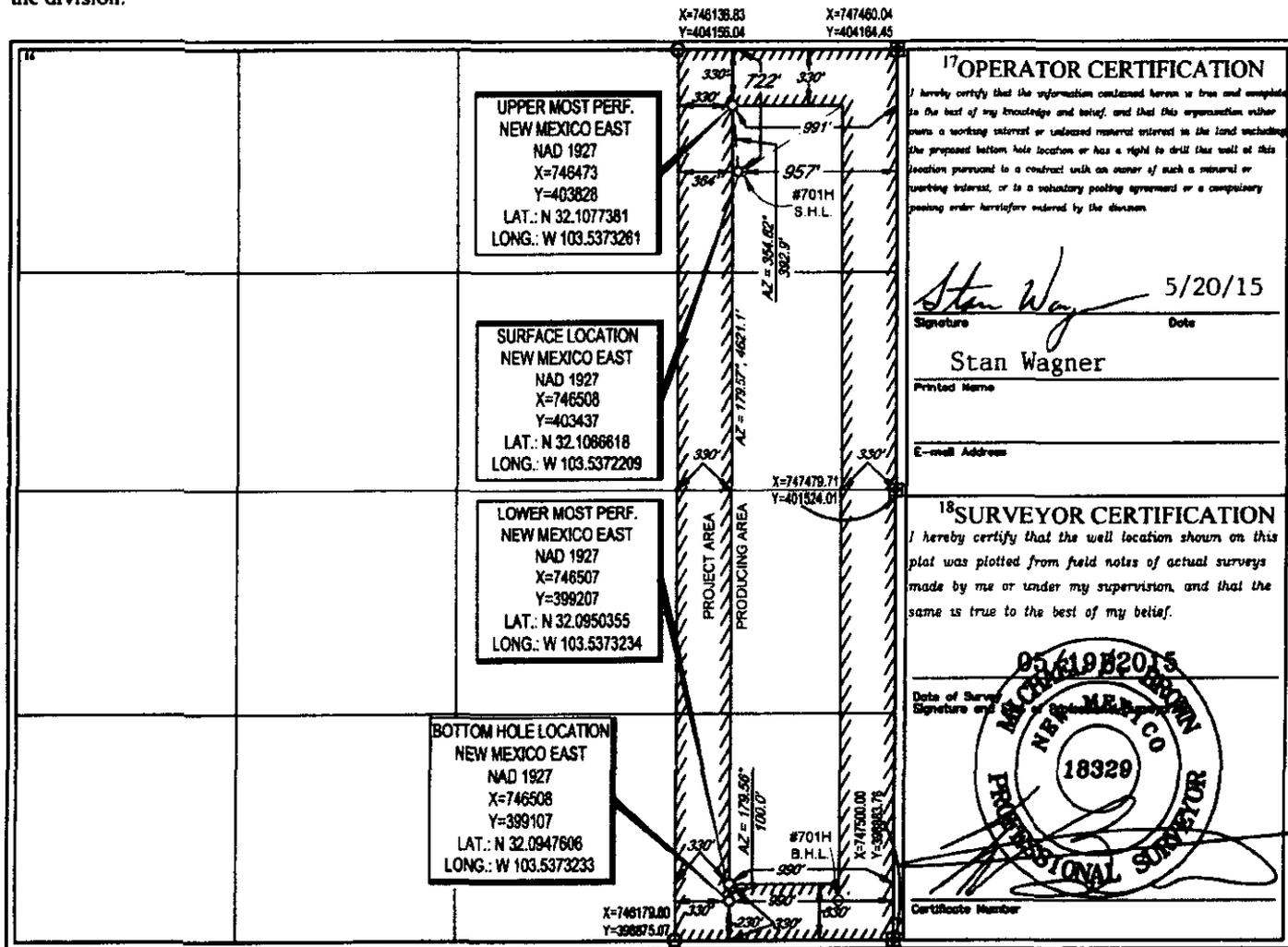
### <sup>10</sup>Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	26	25-S	33-E	-	722'	NORTH	957'	EAST	LEA

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	26	25-S	33-E	-	235	SOUTH	1012	EAST	LEA

<sup>11</sup> Dedicated Acres 160.00	<sup>12</sup> Joint or Infill	<sup>13</sup> Consolidation Code	<sup>14</sup> Order No.
---	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



### <sup>17</sup>OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill that well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

*Stan Wagner* 5/20/15  
Signature Date

Stan Wagner  
Printed Name

E-mail Address

### <sup>18</sup>SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

Date of Survey: 05/19/2015  
Signature and Seal: MICHAEL BROWN, N.M. MEAS. CO., 18329, PROFESSIONAL SURVEYOR  
Certificate Number

08

# HOBBS OCD

FORM C-102

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
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Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources  
Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Sante Fe, NM 87505

APR 14 2016

Revised August 1, 2011

Submit one copy to appropriate

District Office

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AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-42970		<sup>2</sup> Pool Code 98094		<sup>3</sup> Pool Name WC-025 G-09 S253336D; Upper Wolfcamp	
<sup>4</sup> Property Code 37858		<sup>5</sup> Property Name LOMAS ROJAS 26 STATE COM			<sup>6</sup> Well Number #703H
<sup>7</sup> OGRID No. 7377		<sup>8</sup> Operator Name EOG RESOURCES, INC.			<sup>9</sup> Elevation 3344'

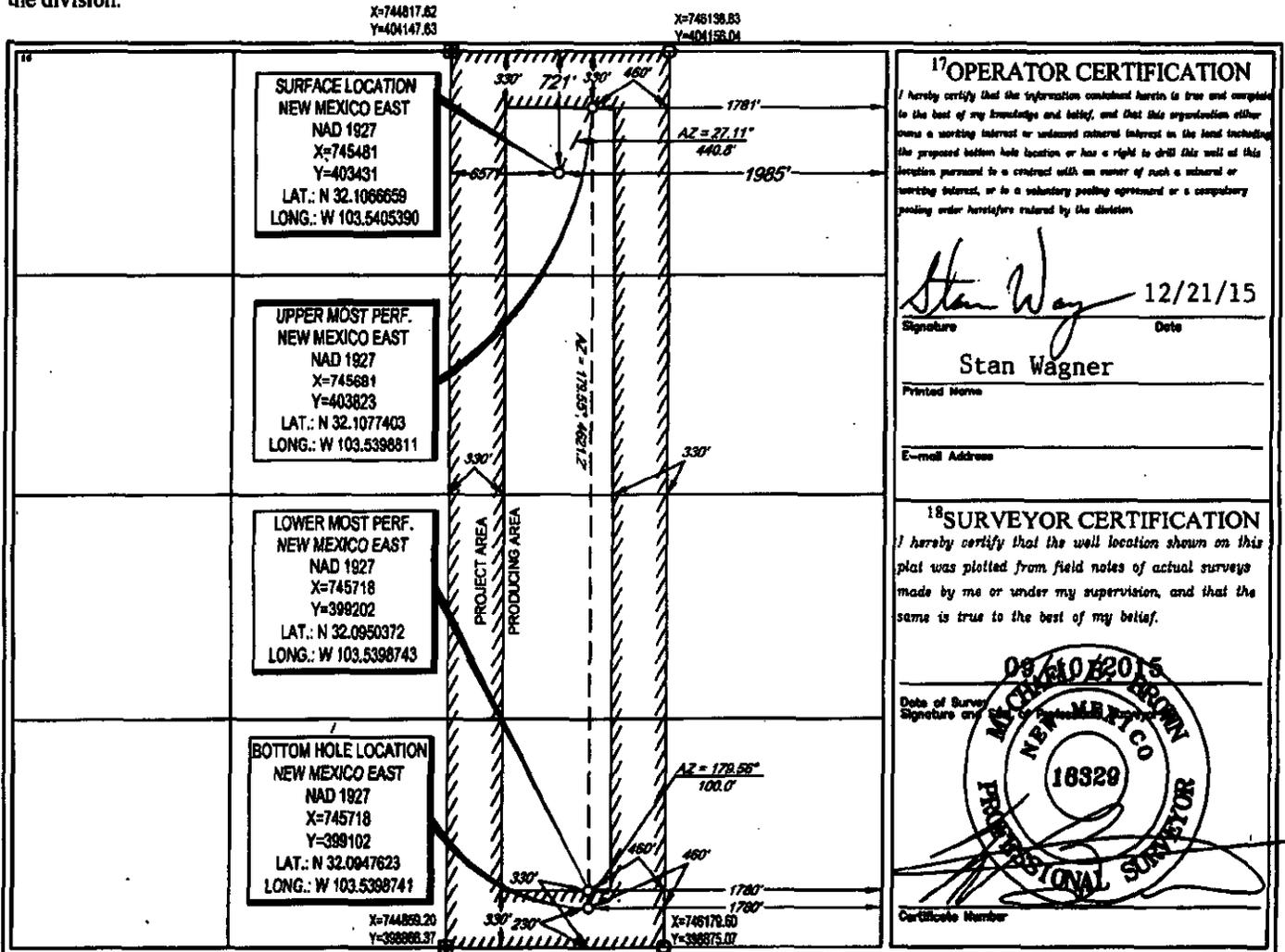
### <sup>10</sup>Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	26	25-S	33-E	-	721'	NORTH	1985'	EAST	LEA

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	26	25-S	33-E	-	228	SOUTH	1787'	EAST	LEA

<sup>11</sup> Dedicated Acres 160.00	<sup>12</sup> Joint or Infill	<sup>13</sup> Consolidation Code	<sup>14</sup> Order No.
---	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



S:\SURVEY\EOG\_MIDLAND\LOMAS\_ROJAS\_26\_STATE\_COM\PLAT\_PRODUCT\150\_LOMASROJAS26STATECOM\_703H\_RBY2.DWG 12/17/2015 4:29:32 PM P:\...

APR 18 2016

Handwritten initials 'M'

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
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State of New Mexico  
Energy, Minerals & Natural Resources  
Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

**HOBBS OCD**

APR 14 2016

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FORM C-102  
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Submit one copy to appropriate  
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AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-025- 42971 ✓		Pool Code 98094	Pool Name WC-025 G-09 S253336D; Upper Wolfcamp
Property Code 37858 ✓	Property Name LOMAS ROJAS 26 STATE COM ✓		Well Number #704H ✓
OGRID No. 7377 ✓	Operator Name EOG RESOURCES, INC. ✓		Elevation 3345'

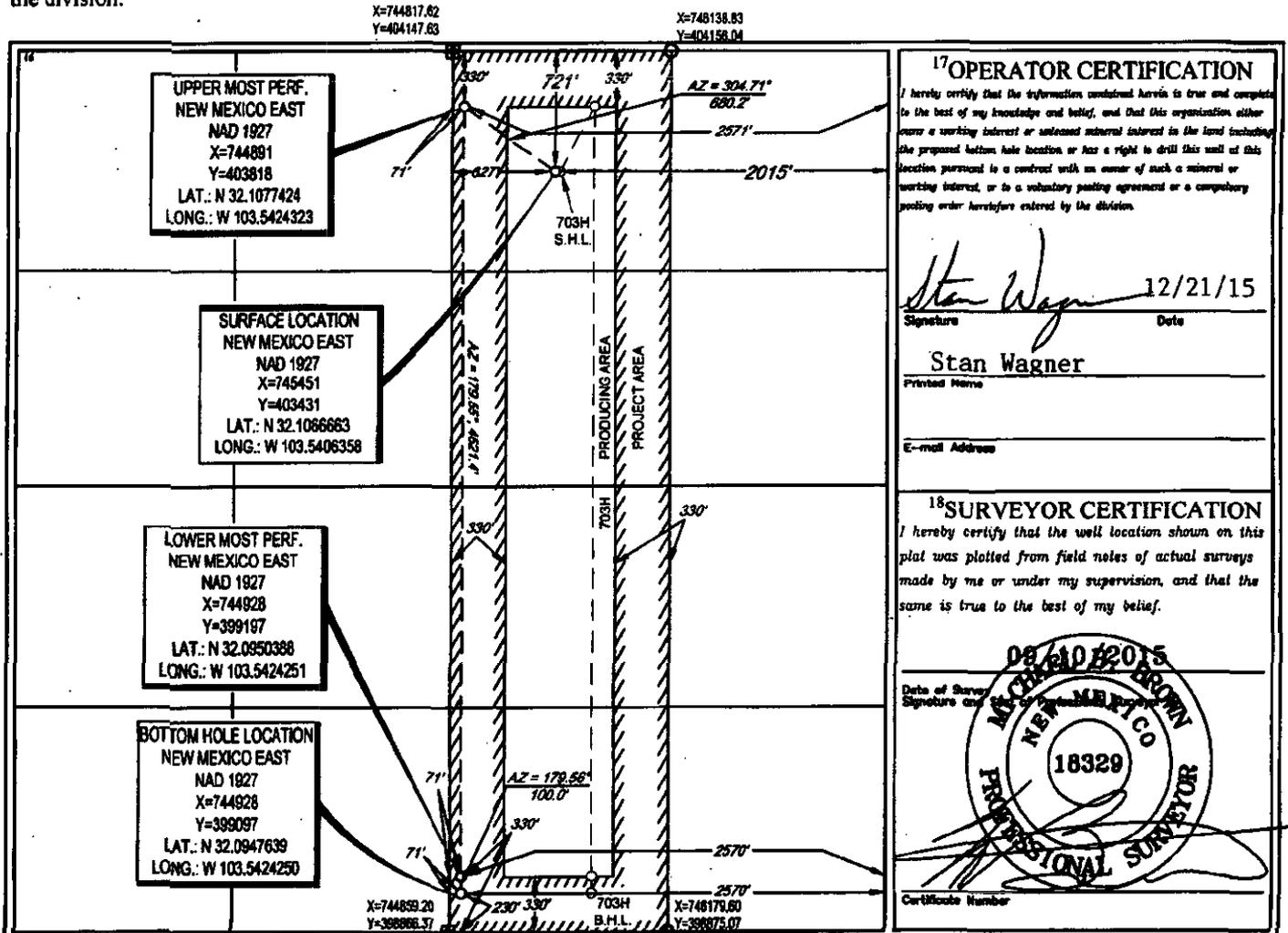
<sup>10</sup>Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	26	25-S	33-E	-	721'	NORTH	2015'	EAST	LEA ✓

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	26	25-S	33-E	-	230'	SOUTH	2555	EAST	LEA

Dedicated Acres 160.00	Joint or Infill	Consolidation Code	Order No. N9L-7987
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



S:\SURVEY\EOG\_MIDLAND\LOMAS\_ROJAS\_26\_STATE\_COM\FINAL\_PRODUCYBLD\_LOMASROJAS26STATECOM\_704H\_REV2.DWG 12/17/2015 12:12 PM ccoast

APR 18 2016

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District I  
1625 N French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

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Energy, Minerals & Natural Resources  
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1220 South St. Francis Dr.  
Santa Fe, NM 87505

FORM C-102  
Revised August 1, 2011  
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 AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number <b>30-025-43218</b>		Pool Code	Pool Name
Property Code	Property Name <b>LOMAS ROJAS 26 STATE COM</b>		Well Number <b>#705H</b>
OGRID No.	Operator Name <b>EOG RESOURCES, INC.</b>		Elevation <b>3341'</b>

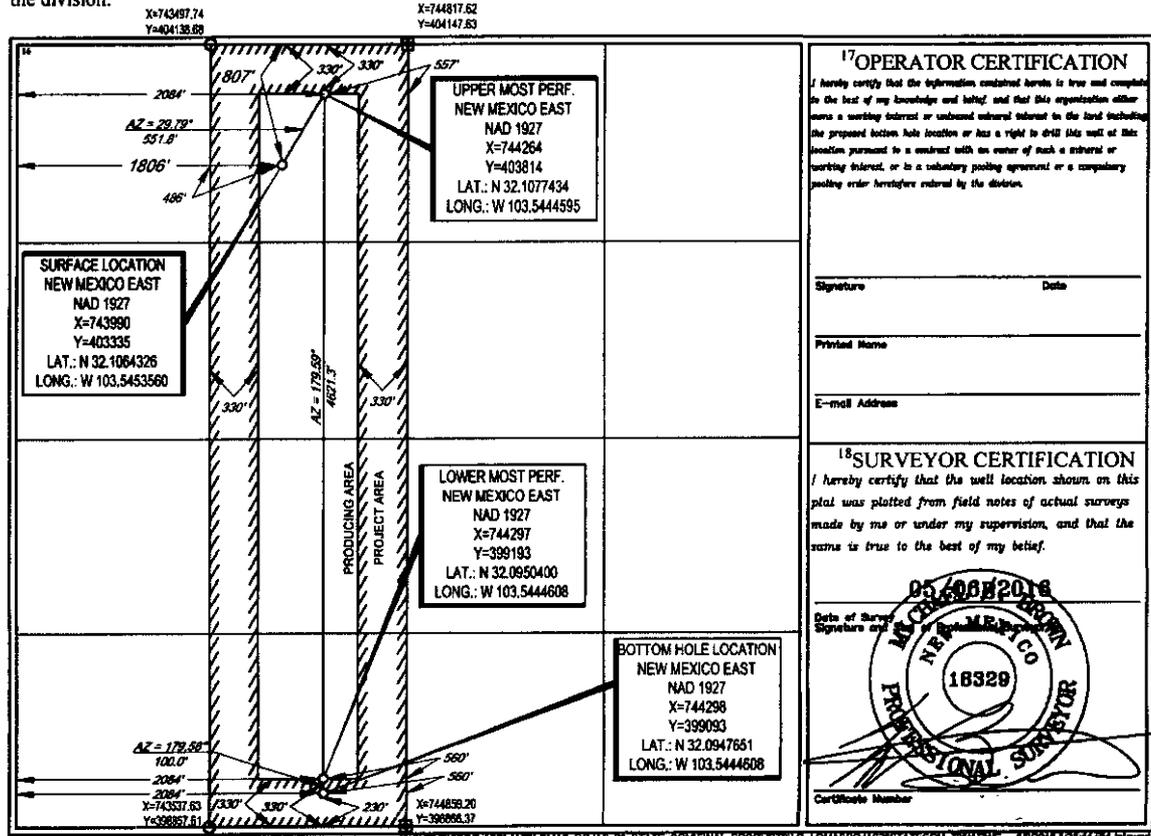
10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	26	25-S	33-E	-	807'	NORTH	1806'	WEST	LEA

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	26	25-S	33-E	-	230'	SOUTH	2084'	WEST	LEA

Dedicated Acres <b>160.00</b>	Joint or Infill	Consolidation Code	Order No.
----------------------------------	-----------------	--------------------	-----------

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**17 OPERATOR CERTIFICATION**  
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with the owner of such a mineral or working interest, or in a subsidiary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

E-mail Address \_\_\_\_\_

**18 SURVEYOR CERTIFICATION**  
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

Date of Survey \_\_\_\_\_  
Signature and Seal of Surveyor

Certificate Number \_\_\_\_\_

District I  
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State of New Mexico  
Energy, Minerals & Natural Resources  
Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

FORM C-102  
Revised August 1, 2011  
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AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number <b>30-025-43219</b>		Pool Code	Pool Name
Property Code	Property Name <b>LOMAS ROJAS 26 STATE COM</b>		Well Number <b>#706H</b>
OGRID No.	Operator Name <b>EOG RESOURCES, INC.</b>		Elevation <b>3342'</b>

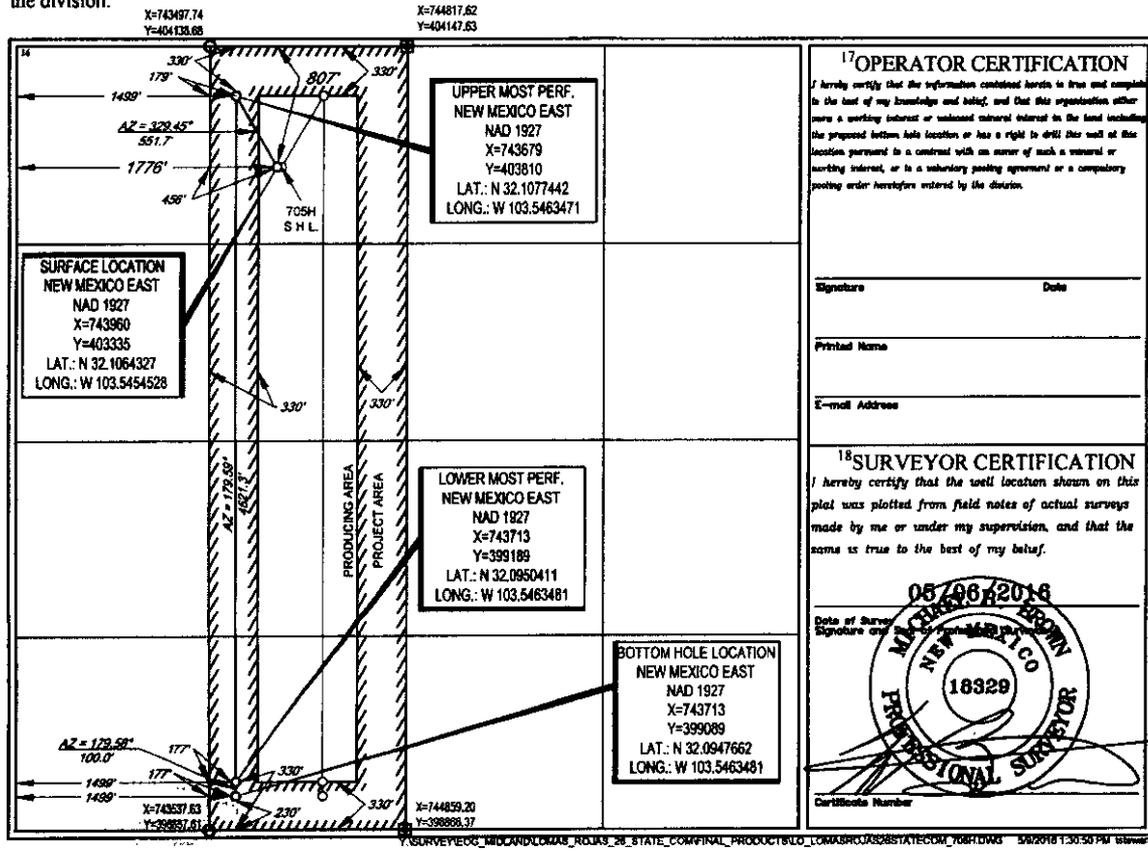
Surface Location

UL or lot no.	Section	Township	Range	Lot Ids	Feet from the	North/South line	Feet from the	East/West line	County
C	26	25-S	33-E	-	807'	NORTH	1776'	WEST	LEA

UL or lot no.	Section	Township	Range	Lot Ids	Feet from the	North/South line	Feet from the	East/West line	County
N	26	25-S	33-E	-	230'	SOUTH	1499'	WEST	LEA

Dedicated Acres <b>160.00</b>	Joint or Infill	Consolidation Code	Order No.
----------------------------------	-----------------	--------------------	-----------

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Energy, Minerals & Natural Resources  
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1220 South St. Francis Dr.  
Sante Fe, NM 87505

FORM C-102  
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AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-43220		<sup>2</sup> Pool Code	<sup>3</sup> Pool Name
<sup>4</sup> Property Code	<sup>5</sup> Property Name LOMAS ROJAS 26 STATE COM		<sup>6</sup> Well Number #707H
<sup>7</sup> OGRID No.	<sup>8</sup> Operator Name EOG RESOURCES, INC.		<sup>9</sup> Elevation 3341'

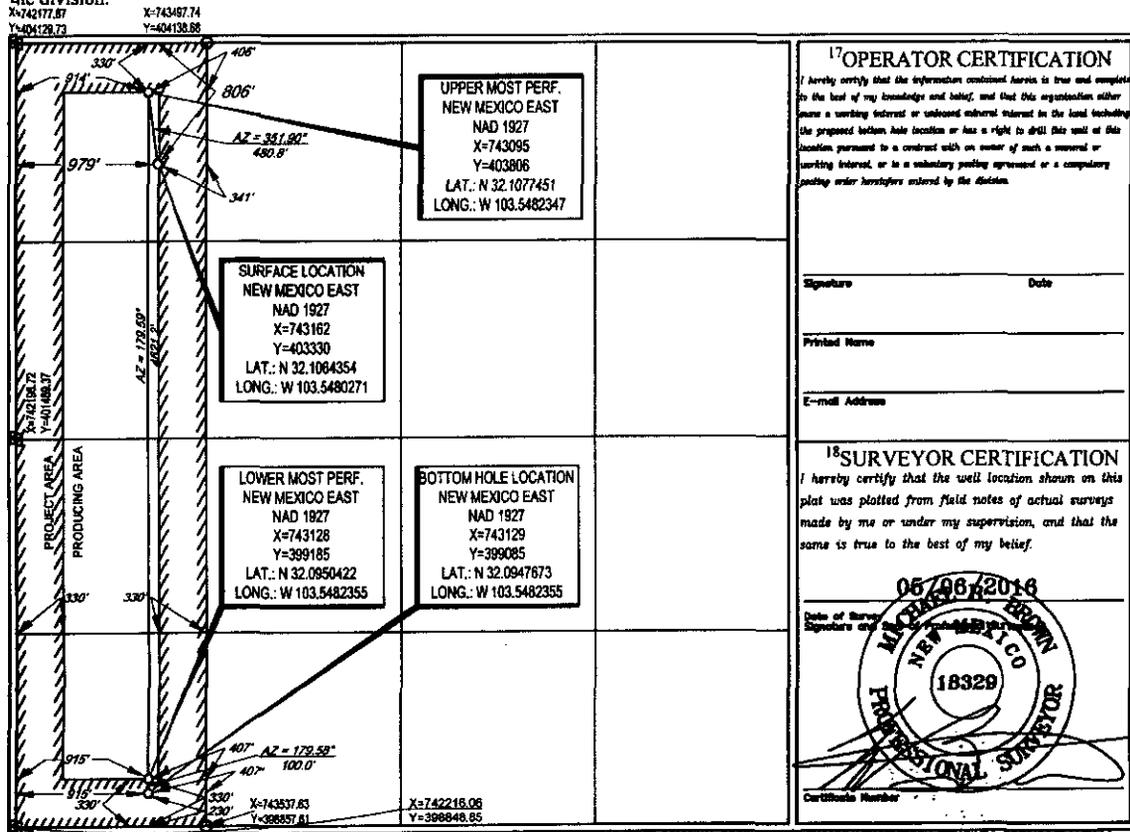
<sup>10</sup>Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	26	25-S	33-E	-	806'	NORTH	979'	WEST	LEA

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	26	25-S	33-E	-	230'	SOUTH	915'	WEST	LEA

<sup>11</sup> Dedicated Acres 160.00	<sup>12</sup> Joint or Infill	<sup>13</sup> Consolidation Code	<sup>14</sup> Order No.
---	-------------------------------	----------------------------------	-------------------------

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<sup>17</sup>OPERATOR CERTIFICATION  
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the Division.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_  
E-mail Address \_\_\_\_\_

<sup>18</sup>SURVEYOR CERTIFICATION  
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

05/26/2016  
Date of Survey  
Signature of \_\_\_\_\_  
18329  
PROFESSIONAL SURVEYOR  
Certificate Number \_\_\_\_\_

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Energy, Minerals & Natural Resources  
Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Sante Fe, NM 87505

FORM C-102  
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Submit one copy to appropriate  
District Office

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number <b>30-025-43221</b>		<sup>2</sup> Pool Code	<sup>3</sup> Pool Name
<sup>4</sup> Property Code	<sup>5</sup> Property Name <b>LOMAS ROJAS 26 STATE COM</b>		<sup>6</sup> Well Number <b>#708H</b>
<sup>7</sup> GRID No.	<sup>8</sup> Operator Name <b>EOG RESOURCES, INC.</b>		<sup>9</sup> Elevation <b>3341'</b>

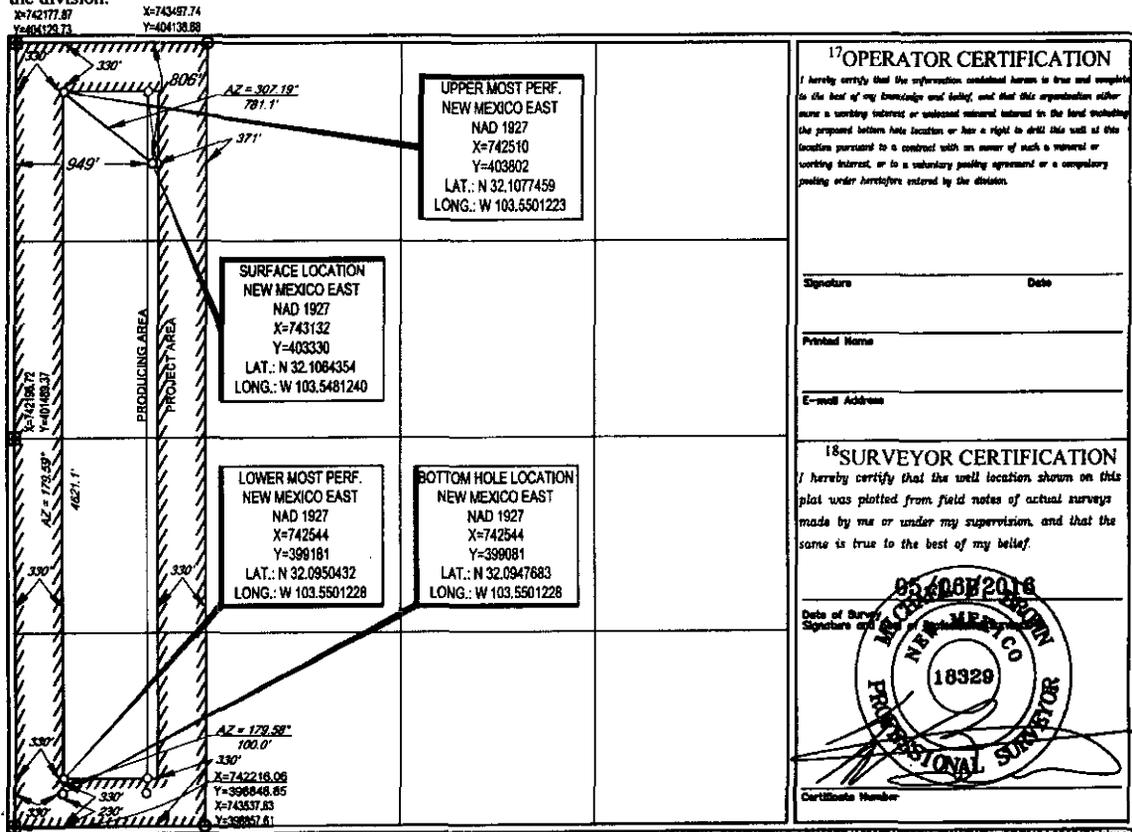
<sup>10</sup>Surface Location

UL or lot no.	Section	Township	Range	Lot Ids	Feet from the	North/South line	Feet from the	East/West line	County
<b>D</b>	<b>26</b>	<b>25-S</b>	<b>33-E</b>	-	<b>806'</b>	<b>NORTH</b>	<b>949'</b>	<b>WEST</b>	<b>LEA</b>

UL or lot no.	Section	Township	Range	Lot Ids	Feet from the	North/South line	Feet from the	East/West line	County
<b>M</b>	<b>26</b>	<b>25-S</b>	<b>33-E</b>	-	<b>230'</b>	<b>SOUTH</b>	<b>330'</b>	<b>WEST</b>	<b>LEA</b>

<sup>11</sup> Dedicated Acres <b>160.00</b>	<sup>12</sup> Joint or Infill	<sup>13</sup> Consolidation Code	<sup>14</sup> Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



Y:\SURVEY\EOG\_MIDLAND\LOMAS ROJAS\_26\_STATE\_COM\FINAL\_PRODUCT\WDS\_LOMASROJAS26STATECOM\_708H.DWG 5/8/2016 1:55:50 PM (1/1)



AUBREY DUNN  
COMMISSIONER

*State of New Mexico*  
*Commissioner of Public Lands*

310 OLD SANTA FE TRAIL  
P.O. BOX 1148  
SANTA FE, NEW MEXICO 87504-1148

COMMISSIONER'S OFFICE  
Phone (505) 827-5760  
Fax (505) 827-5766  
www.nmstatelands.org

Katherine Hathcock  
EOG Resources Inc  
PO Box 2267  
Midland, TX, 79702

September 6th, 2016

Re: Communitization Agreement Approval  
Lomas Rojas 26 State Com Well #708H  
Vertical Extent: Wolfcamp  
Township: 25 South, Range 33 East, NMPM  
Section 26: ALL  
Lea County, New Mexico

Dear Ms Hathcock,

The Commissioner of Public Lands has this date approved the Lomas Rojas 26 State Com Well #708H Communitization Agreement for the Wolfcamp formation effective 6/1/2015. Enclosed are three Certificates of Approval.

The agreement shall remain in effect for One Year, and as long thereafter as communitized substances are produced from the communitized area in paying quantities.

If we may be of further service, please contact Niranjana Khalsa at (505) 827-6628.

Sincerely,

A handwritten signature in black ink, appearing to read "Aubrey Dunn", written over the printed name.

AUBREY DUNN  
COMMISSIONER OF PUBLIC LANDS

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 4  
Submitted by:  
**EOG RESOURCES, INC.**  
Hearing Date: September 29, 2016

**NEW MEXICO STATE LAND OFFICE**

**CERTIFICATE OF APPROVAL**

**COMMISSIONER OF PUBLIC LANDS, STATE OF NEW MEXICO**

**EOG Resources Inc  
Lomas Rojas 26 State Com Well #708H  
Vertical Extent: Wolfcamp  
Township: 25 South, Range: 33 East, NMPM  
Section 26 : ALL  
Lea County, New Mexico**

There having been presented to the undersigned Commissioner of Public Lands of the State of New Mexico for examination, a Consolidation Agreement for the development and operation of acreage which is described within the referenced Agreement dated **June 1, 2015**, which has been executed, or is to be executed by parties owning and holding oil and gas leases and royalty interests in and under the property described, and upon examination of said Agreement, the Commissioner finds:

- (a) That such agreement will tend to promote the conservation of oil and gas and the better utilization of reservoir energy in said area.
- (b) That under the proposed agreement, the State of New Mexico will receive its fair share of the recoverable oil or gas in place under its lands in the area.
- (c) That each beneficiary Institution of the State of New Mexico will receive its fair and equitable share of the recoverable oil and gas under its lands within the area.
- (d) That such agreement is in other respects for the best interests of the State, with respect to state lands.

NOW, THEREFORE, by virtue of the authority conferred upon me under Sections 19-10-45, 19-10-46, 19-10-47, New Mexico Statutes Annotated, 1978 Compilation, I, the undersigned Commissioner of Public Lands of the State of New Mexico, for the purpose of more properly conserving the oil and gas resources of the State, do hereby consent to and approve the said Agreement, and any leases embracing lands of the State of New Mexico within the area shall be and the same are hereby amended to conform with the terms thereof, and shall remain in full force and effect according to the terms and conditions of said Agreement. This approval is subject to all of the provisions of the aforesaid statutes.

IN WITNESS WHEREOF, this Certificate of Approval is executed, with seal affixed, this 6<sup>th</sup> day of September, 2016.

  
\_\_\_\_\_  
**COMMISSIONER OF PUBLIC LANDS**  
of the State of New Mexico

**New Mexico State Land Office  
Oil, Gas, and Mineral Division  
ONLINE VERSION  
CONSOLIDATION OF STATE OIL AND GAS LEASES**

EOG Resources, Inc., Lessee, record title owner of State Oil and Gas Leases numbered VB-0604-0001 and VB-1511-0001, requests approval of lease consolidation affecting: Subdivisions **All Sect 26, T25S, R33E**, N.M.P.M. Lea County, NM to establish a **640.00** acre proration unit in the **Wolfcamp** formation.

Lessee submits a plat, Exhibit A, showing the subject area, leases involved and the requested consolidation. This plat also delineates the proration unit and locates and designates the completed well and consolidated horizon.

Lessee states that the State of New Mexico, for the assigned beneficiaries, owns the royalty interest under these leases and agrees that the state, at its own election, is entitled to delivery in-kind of its share of all communitized substances produced from the leased area.

Approval is requested pursuant to authority granted by applicable statutes. Approval will promote conservation and is in the best interest of the State.

This consolidation, if approved by the Commissioner of Public Lands, shall be effective **June 1, 2015**, and shall continue in effect for **365** days and as long thereafter as communitized substances are produced from the consolidated area in paying quantities; provided, that this agreement shall not expire if there is a well capable of producing gas in paying quantities located upon some part of the consolidated area, if such well is shut-in due to the inability of the operator to obtain a pipeline connection or to market the gas therefrom, and if either:

(a) a shut-in royalty has been timely and properly paid pursuant to the provision of one of the State of New Mexico oil and gas leases covering lands subject to this agreement so as to prevent the expiration of such lease; or

(b) each of the State of New Mexico oil and gas leases covering lands subject to this agreement is in its primary term (if a five-year lease), or is in its primary or secondary term (if a ten-year lease), or is held by production from another well.

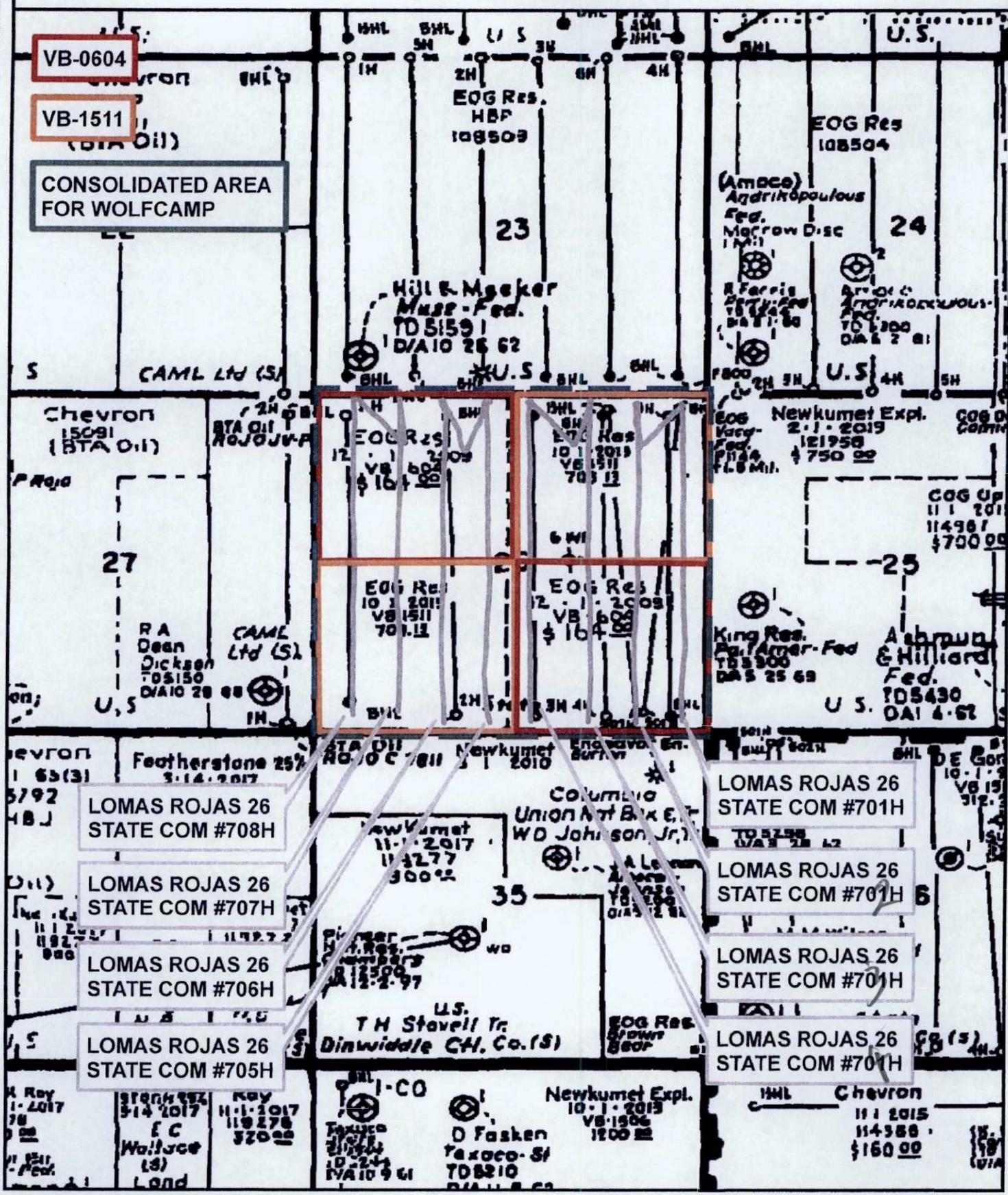
Provided further, however, that prior to production in paying quantities from the consolidated area, and upon fulfillment of all requirements of the Commissioner of Public Lands with respect to any dry hole or abandoned well drilled upon the consolidated area, this Consolidation may be terminated at any time by the Lessee. This consolidation shall not terminate upon cessation of production of communitized substances if, within sixty (60) days thereafter, reworking or drilling operations on the consolidated area are commenced and are thereafter conducted and prosecuted with reasonable diligence. Intention to commence such operations shall be filed with the Commissioner within thirty (30) days after the cessation of such production, and a report of the status of such operations shall be made by the Operator to the Commissioner every thirty (30) days, and the cessation of such operations for more than twenty (20) consecutive days shall be considered as an abandonment of such operations as to any lease from the State of New Mexico included in this agreement.

Requesting approval of consolidation of NM state oil and gas leases



EXHIBIT "A"

ATTACHED TO THAT CERTAIN CONSOLIDATION OF STATE OIL AND GAS LEASES COVERING ALL OF SECTION 26, T25S, R33E, N.M.P.M., LEA COUNTY, NEW MEXICO, AS TO THE WOLFCAMP FORMATION



VB-0604

VB-1511

CONSOLIDATED AREA FOR WOLFCAMP

LOMAS ROJAS 26 STATE COM #708H

LOMAS ROJAS 26 STATE COM #707H

LOMAS ROJAS 26 STATE COM #706H

LOMAS ROJAS 26 STATE COM #705H

LOMAS ROJAS 26 STATE COM #701H

LOMAS ROJAS 26 STATE COM #702H

LOMAS ROJAS 26 STATE COM #703H

LOMAS ROJAS 26 STATE COM #704H

LOMAS ROJAS 26 STATE COM #705H



HOLLAND & HART



**Jordan L. Kessler**  
**Associate**  
Phone (505) 988-4421  
Fax (505) 983-6043  
JLKessler@hollandhart.com

September 9, 2016

**VIA CERTIFIED MAIL**  
**CERTIFIED RECEIPT REQUESTED**

**TO: OFFSET PARTIES**

**Re: Application of EOG Resources For Approval Of A 640-Acre Non-Standard Project Area Comprised Of Acreage Subject To A Proposed State Communitization Agreement, Lea County, New Mexico.**

Ladies & Gentlemen:

This letter is to advise you that EOG Resources, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being consolidated under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on September 29, 2016. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this amended application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Paul Boland, Senior Landman with EOG Resources at (432) 686-3666 or at paul\_boland@eogresources.com

Sincerely,

Jordan L. Kessler  
ATTORNEYS FOR EOG RESOURCES, INC.

**EOG RESOURCES, INC.  
LOMAS ROJAS 640 ACRE NSP**

Sagebrush Interests, LLC  
c/o Wayne Turner  
2450 Fondren, Ste 112  
Houston, TX 72063

RSC Resources, L.P.  
c/o Randy S. Cates  
Guardian Operating Corp.  
6824 Island Circle  
Midland, TX 79707

Bradley S. Bates and Carol S. Bates  
101 Blackberry Court  
Midland, TX 79705

COG Operating, LLC  
One Concho Center  
600 West Illinois Ave.  
Midland, TX 79701

COG Oil & Gas, LLC  
One Concho Center  
600 West Illinois Ave.  
Midland, TX 79701

Concho Oil & Gas, LLC  
One Concho Center  
600 West Illinois Ave.  
Midland, TX 79701

Endeavor Energy Resources, L.P.  
110 North Marienfeld,  
Ste 200  
Midland, TX 79701

Newkumet Exploration, Inc.  
P.O. Box 11330  
Midland, TX 79702

WBA Resources, Ltd.  
110 West Louisiana, Ste 300  
Midland, TX 79701

Petras Energy, L.P.  
P.O. Box 4127  
Midland, TX 79704

Meco IV, LLC  
c/o Rhonda Deimer  
1200 17th Street, Suite 975  
Denver, CO 80202

MRC Permian Company  
c/o Nicholas Weeks  
5400 LBJ Freeway, Suite 1500  
Dallas, TX 75240

R&R Royalty  
c/o Rajan David Ahuja  
Magnum Producing LP  
500 N. Shoreline, Ste 322  
Corpus Christi, TX 78401

BTA Oil Producers LLC  
104 South Pecos  
Midland, TX 79701

7016 0340 0000 0202 9165

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Certified Mail Fee \$ 345

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>280</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

Sagebrush Interests, LLC  
 c/o Wayne Turner  
 2450 Fondren, Ste 112  
 Houston, TX 72063

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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Certified Mail Fee \$ 345

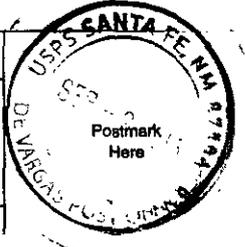
Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>280</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

RSC Resources, L.P.  
 c/o Randy S. Cates  
 Guardian Operating Corp.  
 6824 Island Circle  
 Midland, TX 79707

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<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Randall Cates</u></p> <p>C. Date of Delivery <u>9/13/16</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        If YES, enter delivery address below:</p>												
<p>1. Article Addressed to:</p> <p>RSC Resources, L.P.          c/o Randy S. Cates          Guardian Operating Corp.          6824 Island Circle          Midland, TX 79707</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
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<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
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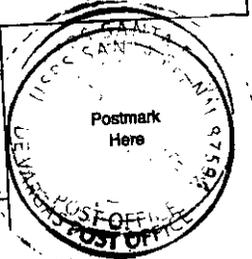
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Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$ 280  
 Return Receipt (electronic) \$  
 Certified Mail Restricted Delivery \$  
 Adult Signature Required \$  
 Adult Signature Restricted Delivery \$



Bradley S. Bates and Carol S. Bates  
101 Blackberry Court  
Midland, TX 79705

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1. Article Addressed to:  
  
Bradley S. Bates and Carol S. Bates  
101 Blackberry Court  
Midland, TX 79705

9590 9402 1838 6104 7867 03

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A. Signature [Signature]  Agent  Addressee

B. Received by (Printed Name) BRADY BATES C. Date of Delivery 9-13-16

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Mail Restricted Delivery
- Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

(over 3500)

Domestic Return Receipt

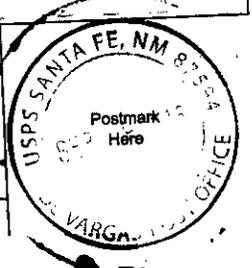
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Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$ 280  
 Return Receipt (electronic) \$  
 Certified Mail Restricted Delivery \$  
 Adult Signature Required \$  
 Adult Signature Restricted Delivery \$



COG Operating, LLC  
One Concho Center  
600 West Illinois Ave.  
Midland, TX 79701

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1. Article Addressed to:  
  
COG Operating, LLC  
One Concho Center  
600 West Illinois Ave.  
Midland, TX 79701

9590 9402 1838 6104 7867 27

7016 0340 0000 0202 9134

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COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature]  Agent  Addressee

B. Received by (Printed Name) JENNIFER C. Date of Delivery 9/12/16

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Mail Restricted Delivery
- Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

(over 3500)

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Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \_\_\_\_\_

**COG Oil & Gas, LLC**  
 One Concho Center  
 600 West Illinois Ave.  
 Midland, TX 79701

USPS SALES OFFICE, NM 87594  
 DE VARGAS POST OFFICE  
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**LOMAS ROJAS**

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Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \_\_\_\_\_

**Concho Oil & Gas, LLC**  
 One Concho Center  
 600 West Illinois Ave.  
 Midland, TX 79701

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A. Signature *[Signature]*  Agent  Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9/12/16*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

**COG Oil & Gas, LLC**  
 One Concho Center  
 600 West Illinois Ave.  
 Midland, TX 79701

9590 9402 1203 5246 0680 50

7016 0340 0000 0202 9127

3. Service Type  Priority Mail Express®  Registered Mail™  Registered Mail Restricted Delivery  Return Receipt for Merchandise  Certified Mail®  Return Receipt for Merchandise  Certified Mail Restricted Delivery  Collect on Delivery  Signature Confirmation™  Collect on Delivery Restricted Delivery  Signature Confirmation Restricted Delivery

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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9/12/16*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

**Concho Oil & Gas, LLC**  
 One Concho Center  
 600 West Illinois Ave.  
 Midland, TX 79701

9590 9402 1203 5246 0680 43

7016 0340 0000 0202 9110

3. Service Type  Priority Mail Express®  Registered Mail™  Registered Mail Restricted Delivery  Return Receipt for Merchandise  Certified Mail®  Return Receipt for Merchandise  Certified Mail Restricted Delivery  Collect on Delivery  Signature Confirmation™  Collect on Delivery Restricted Delivery  Signature Confirmation Restricted Delivery

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LOMAS ROJAS

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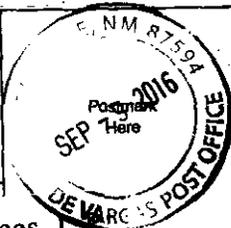
OFFIC

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.80
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

Endeavor Energy Resources, L.P.  
110 North Marienfeld,  
Ste 200  
Midland, TX 79701



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LOMAS ROJAS

For delivery information, visit

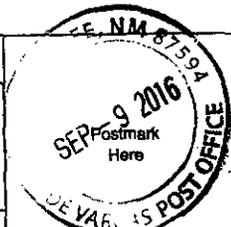
OFFIC

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.80
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

Newkomet Exploration, Inc.  
P.O. Box 11330  
Midland, TX 79702



PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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1. Article Addressed to:

Endeavor Energy Resources, L.P.  
110 North Marienfeld,  
Ste 200  
Midland, TX 79701

9590 9402 1203 5246 0681 35

7016 0340 0000 0202 9103

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Pat Shannon*  Agent  Addressee

B. Received by (Printed Name)

*PAT SHANNON*

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input checked="" type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input checked="" type="checkbox"/> Signature Confirmation™         |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

DP OF ENVELOPE TO THE RIGHT

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Newkomet Exploration, Inc.  
P.O. Box 11330  
Midland, TX 79702

9590 9402 1203 5246 0681 28

7016 0340 0000 0202 9097

PS Form 3811, July 2015 PSN 7530-02-000-9053

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COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Janie Hudson*  Agent  Addressee

B. Received by (Printed Name)

*JANIE HUDSON*

C. Date of Delivery

*9-16-16*

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

*PO BOX 11330  
MIDLAND, TX  
79702*

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input checked="" type="checkbox"/> Signature Confirmation™         |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

7016 0340 0000 0202 9080

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit

MHF/EOG  
LOMAS ROJAS

OFFIC

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$ 345  
 Return Receipt (electronic) \$ 2.80  
 Certified Mail Restricted Delivery \$  
 Adult Signature Required \$  
 Adult Signature Restricted Delivery \$

Postage



WBA Resources, Ltd.  
110 West Louisiana, Ste 300  
Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

WBA Resources, Ltd.  
110 West Louisiana, Ste 300  
Midland, TX 79701

9590 9402 1203 5246 0681 11

2. Article Number (Transfer from service label)

7016 0340 0000 0202 9080

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Karla Rojas*

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Collect on Delivery  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 0340 0000 0202 9073

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit

MHF/EOG  
LOMAS ROJAS

OFFIC

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
 Return Receipt (hardcopy) \$ 345  
 Return Receipt (electronic) \$ 2.80  
 Certified Mail Restricted Delivery \$  
 Adult Signature Required \$  
 Adult Signature Restricted Delivery \$

Postage



Petras Energy, L.P.  
P.O. Box 4127  
Midland, TX 79704

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Petras Energy, L.P.  
P.O. Box 4127  
Midland, TX 79704

9590 9402 1203 5246 0681 04

2. Article Number (Transfer from service label)

7016 0340 0000 0202 9073

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Carla Hails*

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®  
 Certified Mail Restricted Delivery  
 Collect on Delivery  
 Collect on Delivery Restricted Delivery  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery



Domestic Return Receipt

7016 0340 0000 0203 0307

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

MHF/EOG  
 LOMAS ROJAS

For delivery information, visit **OFFICIAL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \_\_\_\_\_

Meco IV, LLC  
 c/o Rhonda Deimer  
 1200 17th Street, Suite 975  
 Denver, CO 80202

USPS SANTA FE, NM 87594  
 Postmark Here  
 SEP -9 2016  
 DEVARGAS POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 0340 0000 0203 0307

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

MHF/EOG  
 LOMAS ROJAS

For delivery information, visit **OFFICIAL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ \_\_\_\_\_

Certified Mail Restricted Delivery \$ \_\_\_\_\_

Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \_\_\_\_\_

MRC Permian Company  
 c/o Nicholas Weeks  
 5400 LBJ Freeway, Suite 1500  
 Dallas, TX 75240

USPS SANTA FE, NM 87594  
 Postmark Here  
 SEP -9 2016  
 DEVARGAS POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ Print your name and address on the reverse so that we can return the card to you.  
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Meco IV, LLC  
 c/o Rhonda Deimer  
 1200 17th Street, Suite 975  
 Denver, CO 80202

9590 9402 1203 5246 0680 98

2 7016 0340 0000 0203 0307

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*X Rhonda Deimer*

B. Received by (Printed Name) C. Date of Delivery  
 \_\_\_\_\_ 9/12/16

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

Adult Signature  Priority Mail Express®  
 Adult Signature Restricted Delivery  Registered Mail™  
 Certified Mail®  Registered Mail Restricted Delivery  
 Certified Mail Restricted Delivery  Return Receipt for Merchandise  
 Collect on Delivery  Signature Confirmation™  
 Delivery Restricted Delivery  Signature Confirmation Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ Print your name and address on the reverse so that we can return the card to you.  
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MRC Permian Company  
 c/o Nicholas Weeks  
 5400 LBJ Freeway, Suite 1500  
 Dallas, TX 75240

9590 9402 1203 5246 0680 81

7016 0340 0000 0203 0307

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*X M. Doan*

B. Received by (Printed Name) C. Date of Delivery  
 M. Doan 9/12/16

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

Adult Signature  Priority Mail Express®  
 Adult Signature Restricted Delivery  Registered Mail™  
 Certified Mail®  Registered Mail Restricted Delivery  
 Certified Mail Restricted Delivery  Return Receipt for Merchandise  
 Collect on Delivery  Signature Confirmation™  
 Delivery Restricted Delivery  Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 0340 0000 0203 0246

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

MHF/EOG  
**LOMAS ROJAS**

For delivery information, visit  
**OFFICE**

Certified Mail Fee  
 \$ 345

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>280</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage

R&R Royalty  
 c/o Rajan David Ahuja  
 Magnum Producing LP  
 500 N. Shoreline, Ste 322  
 Corpus Christi, TX 78401

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



7016 0340 0000 0203 0246

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

MHF/EOG  
**LOMAS ROJAS**

For delivery information, visit  
**OFFICE**

Certified Mail Fee  
 \$ 345

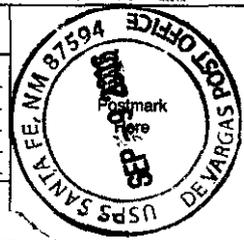
Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>280</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage

BTA Oil Producers LLC  
 104 South Pecos  
 Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 R&R Royalty  
 c/o Rajan David Ahuja  
 Magnum Producing LP  
 500 N. Shoreline, Ste 322  
 Corpus Christi, TX 78401

9590 9402 1203 5246 0680 74

2. Article Number (over \$500)  
 7016 0340 0000 0203 0246

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 [Signature]  Agent  
 Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery \_\_\_\_\_

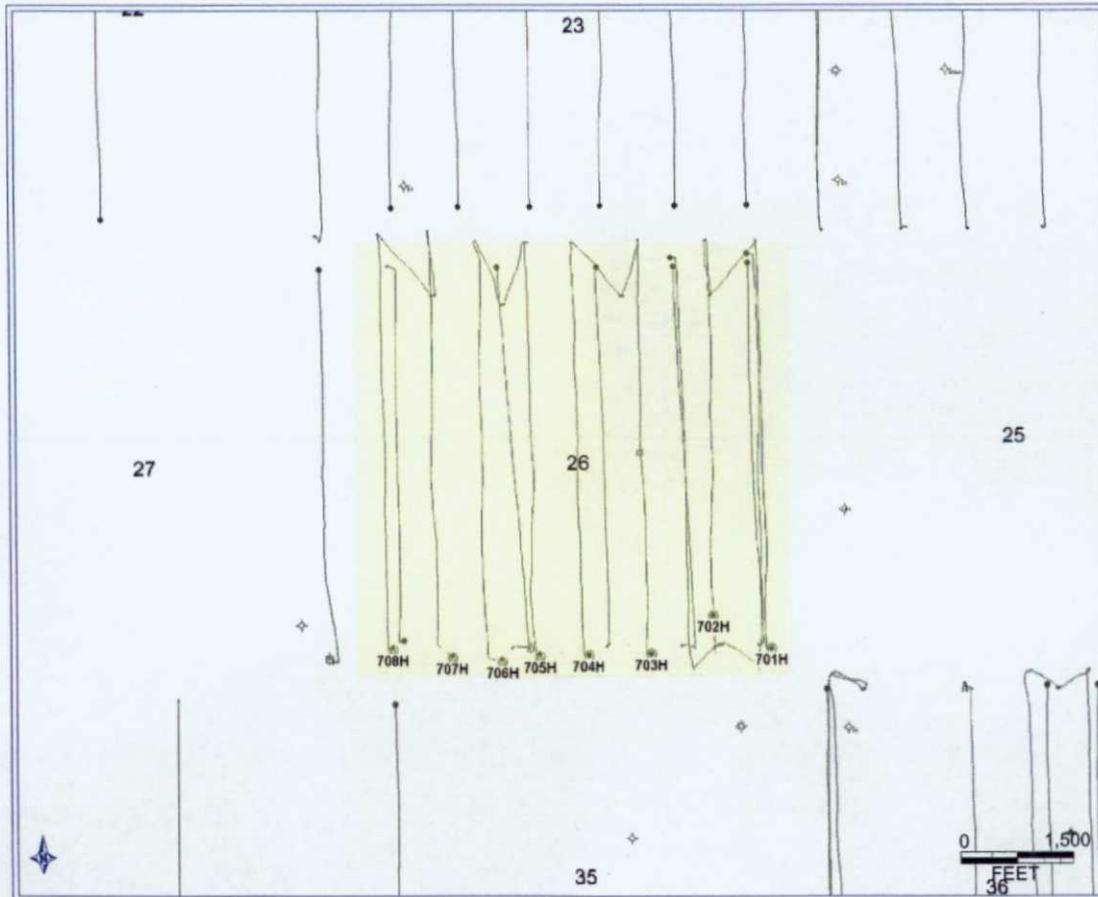
D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input checked="" type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Restricted Delivery (over \$500)	

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

# Lomas Rojas Area Lease Map



## Map Legend

Wells are All Producers

Section 26:  
EOG Resources – Horizontal  
Well Locations

Lomas Rojas 26 State Com.  
WFMP Development Wells  
Labeled

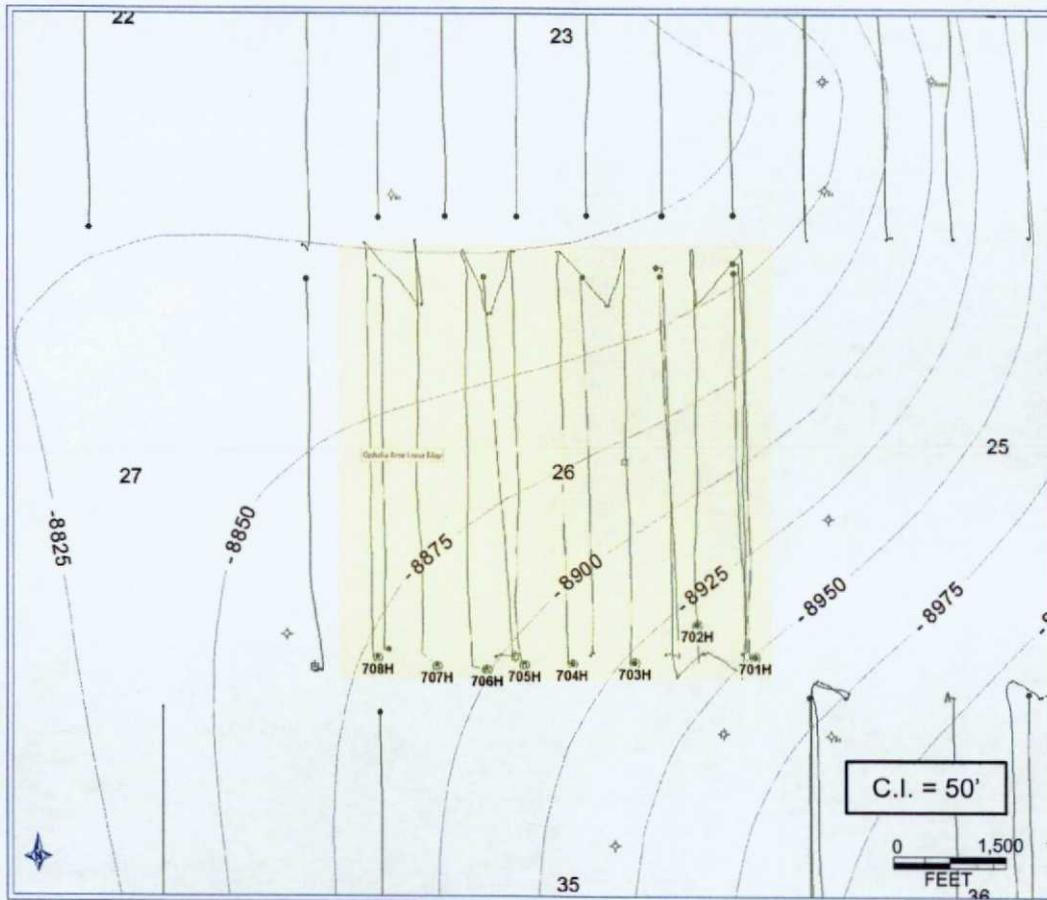
SHL  
|  
●  
BHL



EOG Acreage

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 6  
Submitted by:  
**EOG RESOURCES, INC.**  
Hearing Date: September 29, 2016

# Lomas Rojas Area Structure Map with Producers



## Map Legend

Structural Depth on Top of  
Wolfcamp Fm (sstvd)

Wells are All Producers

Section 26:  
EOG Resources – Horizontal  
Well Locations

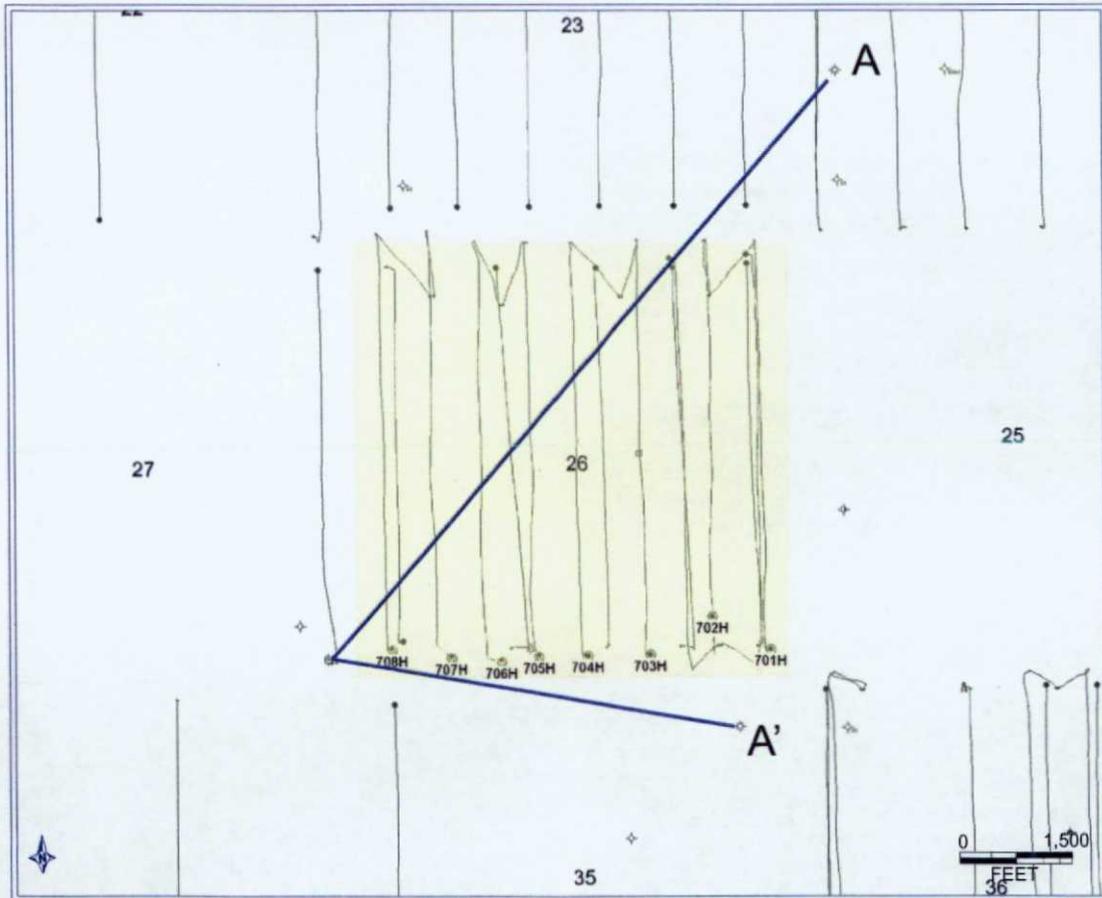
Lomas Rojas 26 State Com.  
WFMP Development Wells  
Labeled

SHL  
|  
●  
BHL



EOG Acreage

# Lomas Rojas Area Cross Section Map



## Map Legend

Wells are All Producers

Section 26:  
EOG Resources – Horizontal  
Well Locations

Lomas Rojas 26 State Com.  
WFMP Development Wells  
Labeled

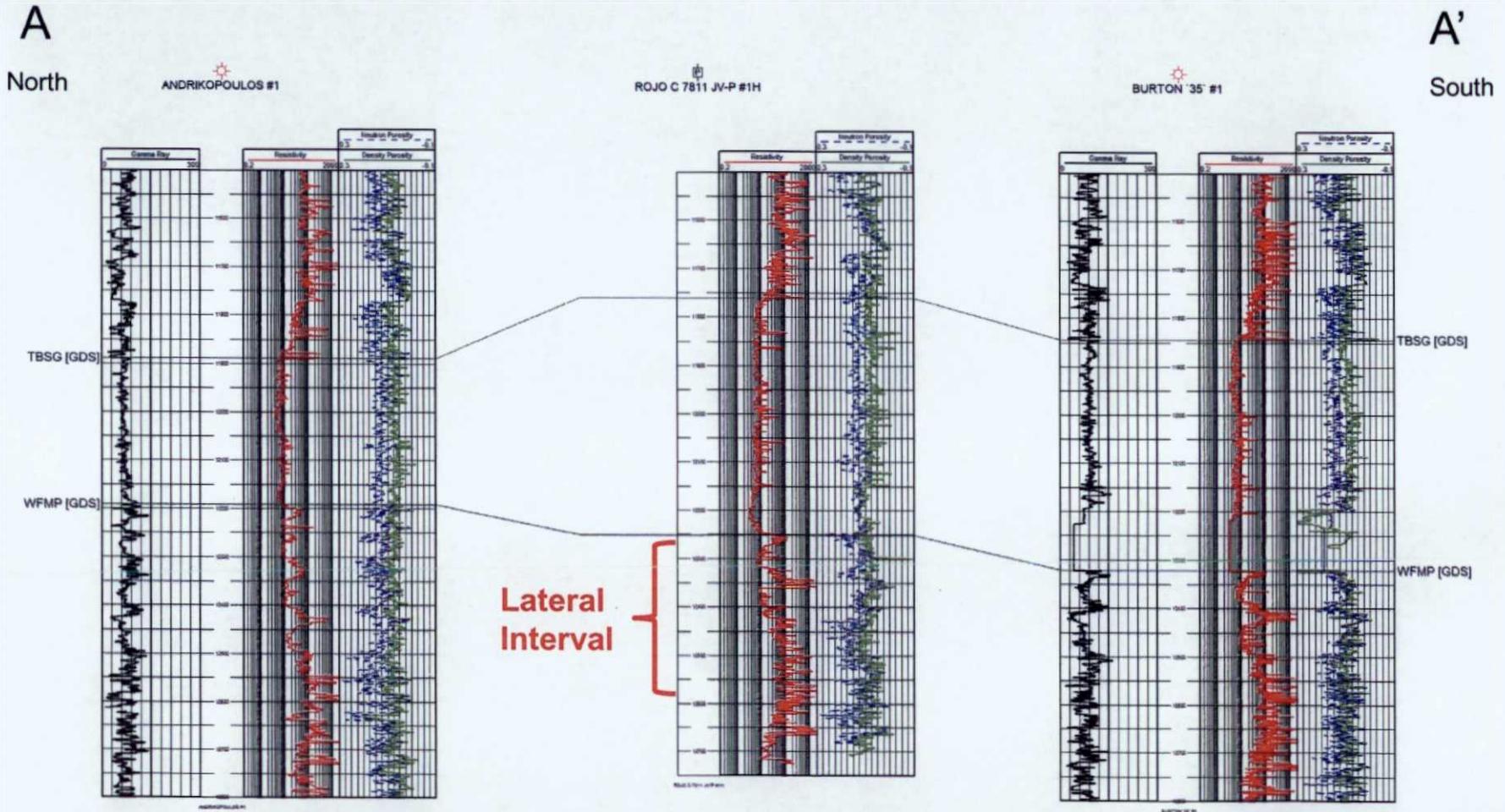
SHL  
|  
●  
BHL



EOG Acreage

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 8  
Submitted by:  
**EOG RESOURCES, INC.**  
Hearing Date: September 29, 2016

# Lomas Rojas Area Cross Section



BEFORE THE OIL CONSERVATION DIVISION  
 Santa Fe, New Mexico  
 Exhibit No. 9  
 Submitted by:  
**EOG RESOURCES, INC.**  
 Hearing Date: September 29, 2016