

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
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address EOG Resources, Inc. P.O. Box 2267 Midland, TX 79702		² OGRID Number 7377
		³ Reason for Filing Code/ Effective Date NW 09/2016
⁴ API Number 30 - 0 25-42876	⁵ Pool Name WC-025 G-09 S263327G; Upper Wolfcamp	⁶ Pool Code 98097
⁷ Property Code 315317	⁸ Property Name Rattlesnake 28 Fed Com	⁹ Well Number 704H

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
B	28	26S	33E		730	North	2100	East	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	33	26S	33E		230	South	2384	East	Lea
¹² Lse Code F	¹³ Producing Method Code Gas Lift	¹⁴ Gas Connection Date 9/30/16	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
7377	EOG Resources, Inc.	Oil
151618	Enterprise Field Services L.L.C.	Gas

IV. Well Completion Data

²¹ Spud Date 6/20/16	²² Ready Date 9/30/16	²³ TD 19769M - 12373V	²⁴ PBSD 19598	²⁵ Perforations 12643 - 19598'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
14-3/4	10-3/4	970	563 C		
9-7/8	7-5/8	10990	550 H, 2743 C		
6-3/4	5-1/2	19760	765 50/50 H		

V. Well Test Data

³¹ Date New Oil 9/30/16	³² Gas Delivery Date 9/30/16	³³ Test Date 10/14/16	³⁴ Test Length 24	³⁵ Tbg. Pressure 1394	³⁶ Csg. Pressure 1379
³⁷ Choke Size Open	³⁸ Oil 2164	³⁹ Water 4240	⁴⁰ Gas 4363		⁴¹ Test Method Flowing

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Signature:

Printed name:
Stan Wagner

Title:
Regulatory Specialist

E-mail Address:

Date:
10/18/16

Phone:
432-686-3689

OIL CONSERVATION DIVISION

Approved by:

Title:

Petroleum Engineer

Approval Date:

10/21/16

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**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.*FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 20105. Lease Serial No.
NMNM02965A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
RATTLESNAKE 28 FED COM 704H9. API Well No.
30-025-4287610. Field and Pool, or Exploratory
WC-025 S263327G11. County or Parish, and State
LEA COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. 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 28 T26S R33E NWNE 730FNL 2100FEL

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.)

7/31/16 Prep well for completion. Perform pre-frac casing test to a max pressure of 11450' psi.
8/10/16 MIRU for completion.
8/11/16 Begin 31 stage completion.
8/21/16 Finish perforating and frac.
Perforated 12643 - 19598', 0.35", 1962 holes.
Frac w/ 720 bbls acid; 17,245,140 lbs proppant; 438,899 bbls load water.
8/26/16 RIH to drill out plugs and clean out well.
8/28/16 Finish drill and clean out.
8/29/16 RIH w/ 5-1/2" production packer set at 12012'.
8/30/16 RIH w/ 2-7/8" production tubing and gas lift assembly. EOT at 12031'.
Well shut-in.
9/30/16 Opened well to flowback. First production.

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

**Electronic Submission #355078 verified by the BLM Well Information System
For EOG RESOURCES, INC., sent to the Hobbs**

Name (Printed/Typed) STAN WAGNER

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 10/18/2016

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.

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

OCT 21 2016

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM02965A

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		
3. Address P.O. BOX 2267 MIDLAND, TX 79702			3a. Phone No. (include area code) Ph: 432-686-3689		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NWNE 730FNL 2100FEL At top prod interval reported below Sec 33 T26S R33E Mer At total depth SWNE 230FSL 2384FEL			8. Lease Name and Well No. RATTLESNAKE 28 FED COM 704H		
14. Date Spudded 06/20/2016			15. Date T.D. Reached 07/11/2016		
16. Date Completed <input type="checkbox"/> D & A <input type="checkbox"/> Ready to Prod. 09/30/2016			9. API Well No. 30-025-42876		
18. Total Depth: MD 19769 TVD 12373			19. Plug Back T.D.: MD 19598 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)			10. Field and Pool, or Exploratory WC-025 S263327G UPPER WC		
			11. Sec., T., R., M., or Block and Survey or Area Sec 28 T26S R33E Mer		
			12. County or Parish LEA		
			13. State NM		
			17. Elevations (DF, KB, RT, GL)* 3245 GL		

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
14.750	10.750 J55	40.5	0	970		563		0	
9.875	7.625 P110	29.7	0	10990		3293		0	
6.750	5.500 P110	23.0	0	19760		765		8530	

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	12031	12012						

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	12643	19598	12643 TO 19598	0.350	1962	PRODUCING
B)						
C)						
D)						

Depth Interval	Amount and Type of Material
12643 TO 19598	720 BBLS ACID; 17,245,140 LBS PROPPANT; 438,899 BBLS LOAD WATER

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
09/30/2016	10/14/2016	24	→	2164.0	4363.0	4240.0	47.0		GAS LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
OPEN	1394 SI	1379.0	→				2016	POW	

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.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

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

ELECTRONIC SUBMISSION #355088 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.)
CAPTURED

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	730	1088	ANHYDRITE	RUSTLER	730
SALT	1089	4640	SALT	SALT	1088
BELL CANYON	4924	5990	SANDSTONE	DELAWARE	4896
BONE SPRING LIME	9127	10066	LIMESTONE	BONE SPRING	9127
1ST BS SAND	10066	10321	SANDSTONE	WOLFCAMP	12197
2ND BS SAND	10637	11083	SANDSTONE		
3RD BS SAND	11756	12197	SANDSTONE		
WOLFCAMP	12197		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 #355088 Verified by the BLM Well Information System.
For EOG RESOURCES, INC., sent to the Hobbs**

Name (please print) STAN WAGNER Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 10/18/2016

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