

District I

1625 N. French Dr., Hobbs, NM 88240

State of New Mexico  
Energy, Minerals & Natural ResourcesForm C-104  
Revised August 1, 2011

District II 811 S. First St., Artesia, NM 88210

District III 1000 Rio Brazos Rd., Aztec, NM 87410

Oil Conservation Division

Submit one copy to appropriate District Office

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

1220 South St. Francis Dr.  
Santa Fe, NM 87505☐ AMENDED REPORT

## I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address EOG RESOURCES INC PO BOX 2267 MIDLAND, TX 79702		<sup>2</sup> OGRID Number 7377
		<sup>3</sup> Reason for Filing Code/ Effective Date NW 04/07/2018
<sup>4</sup> API Number 30 - 025-44005	<sup>5</sup> Pool Name HARDIN TANK; BONE SPRING	<sup>6</sup> Pool Code 96661
<sup>7</sup> Property Code 319568	TOPAZ 11 FEDERAL <i>formerly well # 701H</i>	<sup>9</sup> Well Number 601H

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

UL or lot no. D	Section 11	Township 26S	Range 34E	Lot Idn	Feet from the 483'	North/South NORTH	Feet from the 330'	East/West line WEST	County LEA
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<sup>11</sup> Bottom Hole Location

UL or lot no. M	Section 11	Township 26S	Range 34E	Lot Idn	Feet from the 237'	North/South SOUTH	Feet from the 368'	East/West line WEST	County LEA
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<sup>12</sup> Lse Code S	<sup>13</sup> Producing Method Code FLOWING	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
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## III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
372812	EOGRM	OIL
151618	ENTERPRISE FIELD SERVICES	GAS
298751	REGENCY FIELD SERVICES, LLC	GAS
36785	DCP MIDSTREAM	GAS

## IV. Well Completion Data

<sup>21</sup> Spud Date 02/19/2018	<sup>22</sup> Ready Date 04/07/2018	<sup>23</sup> TD 17,347'	<sup>24</sup> PBTD 17,243'	<sup>25</sup> Perforations 12,940-17,243'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/8"	935'	875 SXS CL C/CIRC		
12 1/4"	9 5/8"	5,257'	1635 SXS CL C/CIRC		
8 3/4"	7 5/8"	11,855'	420 SXS CL C&H ETOC 4278'		
6 3/4"	5 1/2"	17,332'	565 CL H ETOC 10,850'		

## V. Well Test Data

<sup>31</sup> Date New Oil 04/07/2018	<sup>32</sup> Gas Delivery Date 04/07/2018	<sup>33</sup> Test Date 04/12/2018	<sup>34</sup> Test Length 24HRS	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure 1902
<sup>37</sup> Choke Size 46	<sup>38</sup> Oil 1179 BOPD	<sup>39</sup> Water 8817 BWPD	<sup>40</sup> Gas 2021 MCFPD		<sup>41</sup> Test Method

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

Signature:

*Kay Maddox*Printed name:  
Kay MaddoxTitle:  
Regulatory AnalystE-mail Address:  
Kay\_Maddox@eogresources.comDate:  
04/20/2018Phone:  
432-686-3658

OIL CONSERVATION DIVISION

Approved by:

*Karen Sharp*

Title:

*Staff Mgr*

Approval Date:

4-27-18

Pending BLM approvals will  
subsequently be reviewed  
and scanned



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM 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.*

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM66927
2. Name of Operator EOG RESOURCES, INC.		6. If Indian, Allottee or Tribe Name
3a. Address ATTN: STAN WAGNER P.O. BOX 2267 MIDLAND, TX 79702		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-686-3689		8. Well Name and No. TOPAZ 11 FED 701H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T26S R34E Mer NMP NWNW 483FNL 330FWL		9. API Well No. 30-025-44005
		10. Field and Pool or Exploratory Area HARDIN TANK; WOLFCAMP
		11. County or Parish, State LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recompleting 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 recompleting 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.

The target of this well was changed from Wolfcamp to 3rd Bone Spring Sand while drilling. This information will be reflected by the as-drilled completion reports.

EOG Resources requests the well name/ number be changed to:

Topaz 11 Fed 601H to reflect the 3rd BS Sand completion.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #409054 verified by the BLM Well Information System For EOG RESOURCES, INC., sent to the Hobbs</b>	
Name (Printed/Typed) STAN WAGNER	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 03/23/2018

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

Approved By _____	Title _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	
Office _____	

Pending BLM approvals will  
subsequently be reviewed  
and scanned

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully 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 \*\***



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM 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.*

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM66927
2. Name of Operator EOG RESOURCES INCORPORATED Contact: KAY MADDOX Email: Kay_Maddox@EOGRESOURCES.com		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 2267 MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-686-3658	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T26S R34E NWNW 483FNL 330FWL 32.063751 N Lat, 103.447734 W Lon		8. Well Name and No. TOPAZ 11 FEDERAL 601H
		9. API Well No. 30-025-44005
		10. Field and Pool or Exploratory Area HARDIN TANK; BONE SPRING
		11. County or Parish, State LEA COUNTY, NM

**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	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 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.

03/16/2018 Released rig  
03/19/2018 MIRU Pre frac tests, press tst void to 5000 psi, flanges and seals to 8500 psi  
03/30/2018 Begin 20 stage perf & frac  
04/02/2018 Complete perf and frac - perf 12,940-17,243', 3.25", 954 holes, Frac w/11,198,450 lbs proppant, 181,135 bbls load water  
04/03/2018 RIH to drill out plugs, clean out well  
04/07/2018 Open well to flowback,  
Date of First production

**HOBBS OCD**  
**APR 23 2018**  
**RECEIVED**

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

Electronic Submission #411852 verified by the BLM Well Information System  
For EOG RESOURCES INCORPORATED, sent to the Hobbs

Name (Printed/Typed) KAY MADDOX	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 04/20/2018

**THIS SPACE FOR FEDERAL OR STATE OFFICIAL**

Approved By _____	Title _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office _____

Pending BLM approvals will  
subsequently be reviewed  
and scanned

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

(Instructions on page 2)

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

Bureau of Land Management

Hobbs Field Office

414 W. Taylor

Hobbs, New Mexico

505.393.3612

**WATER PRODUCTION & DISPOSAL INFORMATION**

Well: TOPAZ 11 FEDERAL #601H

NWNW Sec 11 T26S, R34E

30-025-44005

1. Name of formations producing water on lease: BONE SPRING
2. Amount of water produced from all formations in barrels per day 4000-8000 BWPD
3. How water is stored on lease Tanks 2-400 bbl tanks
4. How water is moved to disposal facility Pipeline/Trucked
5. Disposal Facility:
  - a. Facility Operators name MACK ENERGY CORP
  - b. Name of facility or well name & number  
Owl State #001  
30-025-29025  
P-15-18S-35E  
Permit No 1134-0  
Water also goes to EOG Water gathering system

Type of facility or wells SWD



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**HOBBS OCD**  
**APR 23 2018**  
**RECEIVED**

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

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM66927	
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 _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator EOG RESOURCES INC		7. Unit or CA Agreement Name and No.	
Contact: KAY MADDOX E-Mail: KAY_MADDOX@EOGRESOURCES.COM		8. Lease Name and Well No. TOPAZ 11 FEDERAL 601H	
3. Address PO BOX 2267 MIDLAND, TX 79702		9. API Well No. 30-025-44005	
3a. Phone No. (include area code) Ph: 432-686-3658		10. Field and Pool, or Exploratory HARDIN TANK;BONE SPRING	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NWNW 483FNL 330FWL 32.063877 N Lat, 103.448198 W Lon At top prod interval reported below NWNW 646FNL 430FWL 32.063420 N Lat, 103.447875 W Lon At total depth SWSW 237FSL 368FWL 32.051340 N Lat, 103.448069 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 11 T26S R34E Mer	
14. Date Spudded 02/19/2018		12. County or Parish LEA	
15. Date T.D. Reached 03/13/2018		13. State NM	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 04/07/2018		17. Elevations (DF, KB, RT, GL)* 3320 GL	
18. Total Depth: MD TVD 17347 12604		19. Plug Back T.D.: MD TVD 17243 12604	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)			

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cement Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
6.750	5.500 HCP-110	23.0		17332		565		10850	
17.500	13.375 J-55	54.5	0	935		875		0	
12.250	9.625 HCK-55	40.0	0	5257		1635		0	
8.750	7.625 HCP-110	29.7	0	11855		420		4278	

24. Tubing Record

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

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	12940	17243	12940 TO 17243	3.130	954	OPEN PRODUCING
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
12940 TO 17243	FRAC W/11,198,450 LBS PROPPANT;181,135 BBLs LOAD FLUID

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
04/07/2018	04/12/2018	24	→	1179.0	2021.0	8817.0	40.0		FLOWES FROM WELL
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
46	SI	1902.0	→				1715	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	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 #411872 VERIFIED BY THE BLM WELL INFORMATION SYSTEM  
\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OP

Pending BLM approvals will  
subsequently be reviewed  
and scanned

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
SOLD

## 30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
RUSTLER T/SALT B/SALT BRUSHY CANYON 1ST BONE SPRING SAND 2ND BONE SPRING SAND 3RD BONE SPRING SAND	911 1307 4033 7829 10521 11068 12135				

32. Additional remarks (include plugging procedure):  
PLEASE REFERENCE ATTACHMENTS

## 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 #411872 Verified by the BLM Well Information System.  
For EOG RESOURCES INC, sent to the Hobbs

Name (please print) KAY MADDOXTitle REGULATORY ANALYST

Signature \_\_\_\_\_ (Electronic Submission)

Date 04/20/2018

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