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1625 N. French Dr., Hobbs, NM 88240

State of New Mexico  
Energy, Minerals & Natural Resources**HOBBS OCD**

Form C-104

Revised August 1, 2011

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

FEB 19 2020

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

Oil Conservation Division

Submit one copy to appropriate District Office

District IV

1220 South St. Francis Dr.

☐ AMENDED REPORT

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

Santa Fe, NM 87505

**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 01/30/2020
<sup>4</sup> API Number 30 - 025-44753	<sup>5</sup> Pool Name SANDERS TANK; UPPER WOLFCAMP	<sup>6</sup> Pool Code 98097
<sup>7</sup> Property Code 321383	PEACHTREE 24 FEDERAL COM	<sup>9</sup> Well Number 709H

**II. <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
M	24	26S	33E		268	SOUTH	786	WEST	LEA

**<sup>11</sup> 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
D	13	26S	33E		110	NORTH	819	WEST	LEA
<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

**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 07/01/2019	<sup>22</sup> Ready Date 01/30/2020	<sup>23</sup> TD 22,805'	<sup>24</sup> PBDT 22,805'	<sup>25</sup> Perforations 12,793 - 22,805'	<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	
12 1/4"		9 5/8"	951'	485 SXS CL C/CIRC	
8 3/4"		7 5/8"	11,635'	1466 SXS CL C&H/CIRC	
6 3/4"		5 1/2"	22,787'	1070 SXS CL H/11,336' CBL	

**V. Well Test Data**

<sup>31</sup> Date New Oil	<sup>32</sup> Gas Delivery Date	<sup>33</sup> Test Date	<sup>34</sup> Test Length	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure
<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas		<sup>41</sup> Test Method

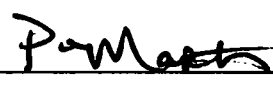
<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:


Printed name:  
Kay MaddoxTitle:  
Senior Regulatory SpecialistE-mail Address:  
Kay\_Maddox@eogresources.comDate:  
02/18/2020Phone:  
432-686-3658

OIL CONSERVATION DIVISION

Approved by:



Title:

L.M.

Approval Date:

2/24/2020

Test Allowable Expires 4/30/2020

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**HOBBS OCD**

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

FEB 19 2020

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

**RECEIVED**

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. NMNM02965A	
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. PEACHTREE 24 FEDERAL COM 709H	
3. Address PO BOX 2267 MIDLAND, TX 79702		9. API Well No. 30-025-44753	
3a. Phone No. (include area code) Ph: 432-686-3658		10. Field and Pool, or Exploratory SANDERS TANK; UPPER WOLFCA	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 24 T26S R33E Mer NMP At surface SWSW 268FSL 786FWL 32.022421 N Lat, 103.532061 W Lon Sec 24 T26S R33E Mer NMP At top prod interval reported below SWSW 452FSL 784FWL 32.022924 N Lat, 103.532066 W Lon Sec 13 T26S R33E Mer NMP At total depth NWNW 110FNL 819FWL 32.050405 N Lat, 103.531948 W Lon		11. Sec., T., R., M., or Block and Survey or Area Sec 24 T26S R33E Mer NMP	
12. County or Parish LEA		13. State NM	
14. Date Spudded 07/01/2019	15. Date T.D. Reached 08/18/2019	16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 01/30/2020	
17. Elevations (DF, KB, RT, GL)* 3345 GL			
18. Total Depth: MD TVD 22805 12579	19. Plug Back T.D.: MD TVD 22805 12519	20. Depth Bridge Plug Set: MD TVD	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)		22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)	

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

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12.250	9.625 J55	40.0		951		485		0	
8.750	7.625 HCP110	29.7		11635		1466		0	
6.750	5.500 ICYP110	20.0		22787		1070		11336	

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) WOLFCAMP	12793	22805	12793 TO 22805	3.250	2154	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
12793 TO 22805	26,015.32 LBS PROPPANT; 372,046 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
01/30/2020	02/13/2020	24	→	3447.0	6455.0	8219.0	44.0		FLows FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
94	SI	1385.0	→				1873	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.	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 #503605 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

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

## 28b. Production - Interval C

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

## 28c. Production - Interval D

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

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

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

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

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
RUSTLER	874		BARREN	RUSTLER	874
T/SALT	1194		BARREN	T/SALT	1194
B/SALT	4970		OIL & GAS	B/SALT	4970
BRUSHY CANYON	7831		OIL & GAS	BRUSHY CANYON	7831
1ST BONE SPRING SAND	10345		OIL & GAS	1ST BONE SPRING SAND	10345
2ND BONE SPRING SAND	10888		OIL & GAS	2ND BONE SPRING SAND	10888
3RD BONE SPRING SAND	11861		OIL & GAS	3RD BONE SPRING SAND	11861
WOLFCAMP	12341		OIL & GAS	WOLFCAMP	12341

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 #503605 Verified by the BLM Well Information System.  
For EOG RESOURCES, INC, sent to the Hobbs

Name (please print) KAY MADDOXTitle REGULATORY SPECIALISTSignature (Electronic Submission)Date 02/18/2020

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

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OGD

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.**

FEB 19 2020

SUBMIT IN TRIPLICATE - Other instructions on page 2

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM02965A
2. Name of Operator EOG RESOURCES, INC		6. If Indian, Allottee or Tribe Name
Contact: KAY MADDOX E-Mail: kay_maddox@eogresources.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address PO BOX 2267 ATTENTION; KAY MADDOX MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-686-3658	8. Well Name and No. PEACHTREE 24 FEDERAL COM 709H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T26S R33E Mer NMP SWSW 268FSL 786FWL 32.022421 N Lat, 103.531948 W Lon		9. API Well No. 30-025-44753
		10. Field and Pool or Exploratory Area SANDERS TANK; UPPER WOLFCA
		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 recomplete 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 recompletion 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.

08/21/2019 RIG RELEASED  
08/23/2019 MIRU PREP TO FRAC, TEST VOID 5000 PSI, SEALS & FLANGES TO 8500 PSI  
11/27/2019 BEGIN PERF & FRAC  
12/16/2019 FINISH 37 STAGES PERF & FRAC 12,793 -22,805', 2154 3 1/8" SHOTS FRAC 26,015,032 LBS  
PROPPANT, 372,046 BBLS LOAD FLUID  
12/18/2019 DRILLED OUT PLUGS AND CLEAN OUT WELLBORE  
01/30/2020 OPENED WELL TO FLOWBACK - DATE OF FIRST PRODUCTION

WILL RUN TBG AND GAS LIFT VALVES WITHIN 3-6 MONTHS, WILL SUBMIT SUNDRY AT THAT TIME LISTING TBG DEPTH.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #503117 verified by the BLM Well Information System For EOG RESOURCES, INC, sent to the Hobbs		
Name (Printed/Typed) KAY MADDOX		Title REGULATORY SPECIALIST
Signature (Electronic Submission)		Date 02/13/2020
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.		Date _____
		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 \*\*