

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

HOBBS OCD

JUL 27 2017

RECEIVED

Submit one copy to appropriate District Office

Form C-104

Revised August 1, 2011

☐ 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 07/20/2017
<sup>4</sup> API Number 30 - 025-43664	<sup>5</sup> Pool Name WC-025 G09 S263327G: UPPER WOLFCAMP	<sup>6</sup> Pool Code 98097
<sup>7</sup> Property Code 315645	ORRTANNA 20 FEDERAL	<sup>9</sup> Well Number 704H

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

UL or lot no. N	Section 20	Township 26S	Range 33E	Lot Idn	Feet from the 221'	North/South SOUTH	Feet from the 1999'	East/West line WEST	County LEA
<sup>11</sup> Bottom Hole Location									
UL or lot no. C	Section 20	Township 26S	Range 33E	Lot Idn	Feet from the 147'	North/South NORTH	Feet from the 2367'	East/West line WEST	County LEA
<sup>12</sup> Lse Code S	<sup>13</sup> Producing Method Code FLOWING	<sup>14</sup> Gas Connection Date 07/20/2017	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

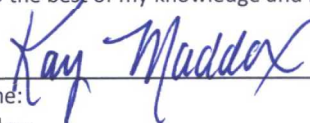


## III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
7377	EOGM RESOURCES	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 04/03/2017	<sup>22</sup> Ready Date 07/20/2017	<sup>23</sup> TD 17,160'	<sup>24</sup> PBDT 16,966'	<sup>25</sup> Perforations 12533-16966'	<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		
14 3/4"	10 3/4"	1032'	835 SXS CL C/CIRC		
8 3/4"	7 5/8"	11,603'	3131 SXS CL C/CIRC		
6 3/4"	5 1/2"	17,150'	575 SXS CL H ETOC 8850'		

## V. Well Test Data

<sup>31</sup> Date New Oil 07/20/2017	<sup>32</sup> Gas Delivery Date 07/20/2017	<sup>33</sup> Test Date 07/23/2017	<sup>34</sup> Test Length 24HRS	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure 1991
<sup>37</sup> Choke Size 46	<sup>38</sup> Oil 2683 BOPD	<sup>39</sup> Water 7196 BWPD	<sup>40</sup> Gas 5341 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: 			OIL CONSERVATION DIVISION		
Printed name: Kay Maddox			Approved by: 		
Title: Regulatory Analyst			Title: Petroleum Engineer.		
E-mail Address: Kay_Maddox@eogresources.com			Approval Date: 		
Date: 07/26/2017		Phone: 432-686-3658			

C-104 TEMPORARY APPROVAL pending receipt of approved  
BLM forms attached

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***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. NMNM118727
2. Name of Operator EOG RESOURCES INCORPORATED		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 2267 MIDLAND, TX 79702		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-686-3658		8. Well Name and No. ORRTANNA 20 FEDERAL 704H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 20 T26S R33E SESW 221FSL 1999FWL		9. API Well No. 30-025-43664
		10. Field and Pool or Exploratory Area WC025G09S263327G;UPWC
		11. County or Parish, State LEA COUNTY, NM

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

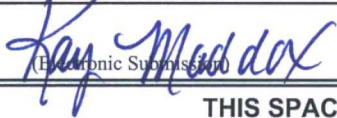
TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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.

05/12/2017 Reached TD 17,160'  
05/15/2017 Released rig  
07/02/2017 RU Prep well for completion, press test  
seals to 9500 psi  
07/11/2017 Begin 22 stage perf & frac  
07/17/2017 Finish perforating and frac - perf 12,533-16,966 , 3.25",  
1328 holes, Frac w/ 12,206,100 lbs proppant, 230,569 bbls  
load water  
07/19/2017 RIH to drill out plugs and clean out well  
07/20/2017 Open well to flowback, Date of First production

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

**Electronic Submission #382687 verified by the BLM Well Information System  
For EOG RESOURCES INCORPORATED, sent to the Hobbs**

Name (Printed/Typed) KAY MADDOX	Title REGULATORY ANALYST
Signature 	Date 07/26/2017

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

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

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

(Instructions on page 2)

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



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

HOBBS OCD  
JUL 27 2017  
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. NMNM118727		
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. ORRTANNA 20 FEDERAL 704H		
3. Address PO BOX 2267 MIDLAND, TX 79702			9. API Well No. 30-025-43664		
3a. Phone No. (include area code) Ph: 432-686-3658			10. Field and Pool, or Exploratory WC025G09S263327G; UPPER WC		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface SESW 221FSL 1999FWL 32.022247 N Lat, 103.595893 W Lon At top prod interval reported below SESW 512FSL 2287FWL 32.023046 N Lat, 103.594960 W Lon At total depth NENW 147FNL 2367FWL 32.035732 N Lat, 103.594716 W Lon			11. Sec., T., R., M., or Block and Survey or Area Sec 20 T26S R33E Mer		
14. Date Spudded 4/03/2017			15. Date T.D. Reached 05/12/2017		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 07/20/2017			17. Elevations (DF, KB, RT, GL)* 3232 GL		
18. Total Depth: MD 17160 TVD 12300			19. Plug Back T.D.: MD 16966 TVD 12304		
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 Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14.750	10.750 J55	40.5	0	1032		835		0	
8.750	7.625 P-110	29.7	0	11603		3131		0	
6.750	5.500 P-110	23.0	0	17150		575		8850	

## 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	12533	16966	12533 TO 16966	3.250	1328	OPEN PRODUCING
B)						
C)						
D)						

## 26. Perforation Record

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

Depth Interval	Amount and Type of Material
12533 TO 16966	FRAC W/12,206,100 LBS PROPPANT;230,569 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
07/20/2017	07/23/2017	24	→	2683.0	5341.0	7196.0	45.0		FLOWS 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	1940.0	→				1991	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 #382700 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 T/SALT B/SALT BRUSHY CANYON 1ST BONE SPRING SAND 2ND BONE SPRING SAND 3RD BONE SPRING SAND WOLFCAMP	805 1156 4617 7458 9951 10530 11682 12147				

## 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 #382700 Verified by the BLM Well Information System.  
For EOG RESOURCES INC, sent to the Hobbs

Name (please print) KAY MADDOX

Title REGULATORY ANALYST

Signature (Electronic Submission)



Date 07/26/2017

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 \*\*