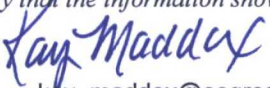


Submit To Appropriate District Office Two Copies <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 811 S. First St., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505		State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-105 Revised August 1, 2011						
		<div style="position: relative; height: 40px;"> HOBBS OGD OCT 20 2017 RECEIVED </div>		1. WELL API NO. 30-025-43757						
		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN		3. State Oil & Gas Lease No.						
WELL COMPLETION OR RECOMPLETION REPORT AND LOG										
4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)				5. Lease Name or Unit Agreement Name ARES 4 STATE 6. Well Number: 201H						
7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER										
8. Name of Operator EOG RESOURCES INC				9. OGRID 7377						
10. Address of Operator PO BOX 2267 MIDLAND, TEXAS 79702				11. Pool name or Wildcat TRIPLE X; BONE SPRING						
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	O	4	24S	33E		773	SOUTH	1646	EAST	LEA
BH:	B	4	24S	33E		229	NORTH	2302	EAST	LEA
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released		16. Date Completed (Ready to Produce)		17. Elevations (DF and RKB, RT, GR, etc.)				
08/09/2017	09/04/2017	09/07/2017		10/04/2017		3579' GR				
18. Total Measured Depth of Well		19. Plug Back Measured Depth		20. Was Directional Survey Made?		21. Type Electric and Other Logs Run				
MD 14,805 TVD 9941'		MD 14,694' TVD 9939'		YES		None				
22. Producing Interval(s), of this completion - Top, Bottom, Name BONE SPRING 10,385-14733										
23. CASING RECORD (Report all strings set in well)										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13 3/8"		54.5# J-55		1,346'		17 1/2"		1150 SXS CL C/CIRC		
9 5/8"		40# J-55		5,103'		12 1/4"		1720 SXSCL C / CIRC		
5 1/2"		20# ECP-110		14,793'		8 3/4"		1960 SXS CL H & C		ETOC 1000'
24. LINER RECORD						25. TUBING RECORD				
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN		SIZE	DEPTH SET	PACKER SET		
26. Perforation record (interval, size, and number)						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
10,201-14,694' 3 1/8" 994 holes						DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED		
						10,201-14,694'		Frac w/11,901,080 lbs proppant; 233,922 bbls load fid		
28. PRODUCTION										
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)				
10/04/2017		FLOWING				PRODUCING				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio			
10/14/2017	24	64		1480	2236	5385	1511			
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)				
	469									
29. Disposition of Gas (Sold, used for fuel, vented, etc.)						30. Test Witnessed By				
SOLD										
31. List Attachments C-102, C-103, C-104, Directional Survey, As-Completed plat										
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.										
33. If an on-site burial was used at the well, report the exact location of the on-site burial:										
Latitude _____ Longitude _____ NAD 1927 1983										
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief										
Signature	Printed Name			Title	Date					
	Kay Maddox			Regulatory Analyst	10/17/17					
E-mail Address	key_maddox@eogresources.com									



INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico				Northwestern New Mexico			
T. Anhy	Rustler	1280'	T. Canyon	Brushy	7470'	T. Ojo Alamo	T. Penn A"
T. Salt		1787'	T. Strawn			T. Kirtland	T. Penn. "B"
B. Salt		4865'	T. Atoka			T. Fruitland	T. Penn. "C"
T. Yates			T. Miss			T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers			T. Devonian			T. Cliff House	T. Leadville
T. Queen			T. Silurian			T. Menefee	T. Madison
T. Grayburg			T. Montoya			T. Point Lookout	T. Elbert
T. San Andres			T. Simpson			T. Mancos	T. McCracken
T. Glorieta			T. McKee			T. Gallup	T. Ignacio Otzte
T. Paddock			T. Ellenburger			Base Greenhorn	T. Granite
T. Blinbry			T. Gr. Wash			T. Dakota	
T. Tubb			T. Delaware Sand			T. Morrison	
T. Drinkard			T. Bone Springs			T. Todilto	
T. Abo			T. 1st BS Sand	10,156'		T. Entrada	
T. Wolfcamp			T. 2nd BS Sand	10,793'		T. Wingate	
T. Penn			T.			T. Chinle	
T. Cisco (Bough C)			T.			T. Permian	

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....
No. 2, from.....to.....

No. 3, from.....to.....
No. 4, from.....to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....
 No. 2, from.....to.....feet.....
 No. 3, from.....to.....feet.....

No. 2, from.....to.....feet.....
No. 3, from.....to.....feet.....

No. 3, from.....to.....feet.....

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology