

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 CO

Form C-104

Revised August 1, 2011

FEB 22 2018

RECEIVED

Submit one copy to appropriate District Office

☐ 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 02/02/2018
<sup>4</sup> API Number 30 - 025-43865	<sup>5</sup> Pool Name WC-025 G09 S253309 A; UPPER WOLFCAMP	<sup>6</sup> Pool Code 98180
<sup>7</sup> Property Code 318084	AUDACIOUS BTL 19 FEDERAL COM	<sup>9</sup> Well Number 4H

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

Ul or lot no. I	Section 19	Township 25S	Range 33E	Lot Idn	Feet from the 2589'	North/South SOUTH	Feet from the 955'	East/West line EAST	County LEA
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<sup>11</sup> Bottom Hole Location

UL or lot no P	Section 30	Township 25S	Range 33E	Lot Idn	Feet from the 238'	North/South SOUTH	Feet from the 915'	East/West line EAST	County LEA
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<sup>12</sup> Lse Code	<sup>13</sup> Producing Method Code FLOWING	<sup>14</sup> Gas Connection Date 02/02/2018	<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
36785	DCP MIDSTREAM	GAS
298751	REGENCY FIELD SERVICES	GAS

## IV. Well Completion Data

<sup>21</sup> Spud Date 10/04/2017	<sup>22</sup> Ready Date 02/02/2018	<sup>23</sup> TD 19,714' 12319	<sup>24</sup> PBDT 19,613'	<sup>25</sup> Perforations 12,590-19,613'	<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"	1090'	975 SXS CL C/CIRC		
9 7/8"	7 5/8"	11,611'	3120 SXS CL C/CIRC		
6 3/4"	5 1/2"	19,704'	780 SXS CL H/ETOC 10678'		

## V. Well Test Data

<sup>31</sup> Date New Oil 02/02/2018	<sup>32</sup> Gas Delivery Date 02/02/2018	<sup>33</sup> Test Date 02/10/2018	<sup>34</sup> Test Length 24HRS	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure 2475
<sup>37</sup> Choke Size 42/64	<sup>38</sup> Oil 2122 BOPD	<sup>39</sup> Water 6230 BWPD	<sup>40</sup> Gas 4292 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 Maddox

Title:

Regulatory Analyst

E-mail Address:

Kay\_Maddox@eogresources.com

Date:

02/21/2018

Phone:

432-686-3658

OIL CONSERVATION DIVISION

Approved by:

Karen Sharp

Title:

Staff Mgr

Approval Date:

3-5-18

Pending BLM approvals will  
subsequently be reviewed  
and scanned

gcp 2-22-18



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.***HOBBS OGD**  
**FEB 22 2018**  
**RECEIVED**Lease Serial No.  
NMNM110838

6. If Indian, Allottee or Tribe Name

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

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

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.  
AUDACIOUS BTL 19 FED COM 4H

2. Name of Operator

EOG RESOURCES, INC.

Contact: STAN WAGNER

E-Mail: stan\_wagner@eogresources.com

9. API Well No.

30-025-43865

3a. Address

ATTN: STAN WAGNER P.O. BOX 2267  
MIDLAND, TX 79702

3b. Phone No. (include area code)

Ph: 432-686-3689

10. Field and Pool or Exploratory Area  
WC-025 S253309P UPFR WC

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 19 T25S R33E Mer NMP NESE 2589FSL 955FEL

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	Drilling Operations
	<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.

11/28/17 TD at 19714' MD.

Ran 5-1/2", 23#, HCP-110 VAM TOP HT (0'-11414')

Ran 5-1/2", 23#, CYHP-110 Ultra SF (11141'-19704')

11/29/17 Cement w/ 780 sx Class H, 15.6 ppg, 1.23 CFS yield;  
Tested casing to 6030. ETOC at 10678'.

11/30/17 Rig released.

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

**Electronic Submission #396617 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 12/01/2017

**THIS SPACE FOR FEDERAL OR STATE C**

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 \*\***

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.*5. Lease Serial No.  
NMNM110838

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**7. If Unit or CA/Agreement, Name and/or No.  
NMNM137368

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.  
AUDACIOUS BTL 19 FEDERAL COM 4H

2. Name of Operator

Contact: KAY MADDOX

EOG RESOURCES INCORPORATED E-Mail: Kay\_Maddox@EOGRESOURCES.com

9. API Well No.

30-025-43865

3a. Address

PO BOX 2267  
MIDLAND, TX 79702

3b. Phone No. (include area code)

Ph: 432-686-3658

10. Field and Pool or Exploratory Area  
WC025G09S253309A;UP WC

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 19 T25S R33E NWSE 2589FSL 955FEL  
32.115825 N Lat, 103.605450 W Lon

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.

11/30/2017 Released rig  
12/28/2017 MIRU Pre frac tests, press tst flanges seals 8500 psi,tst void to 5000 psi, RDMO  
01/13/2018 MIRU Begin 31 stage perf & frac  
01/27/2018 Complete perf and frac - perf 12,590-19,613', 3.25", 1488 holes, Frac w/17,601,620 lbs proppant, 290,899 bbls load water  
01/31/2018 RIH to drill out plugs and clean out well  
02/02/2018 Open well to flowback,  
Date of First production

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

**Electronic Submission #405093 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 02/20/2018

**THIS SPACE FOR FEDERAL OR STATE OFFICIAL APPROVAL**Pending BLM approvals will  
subsequently be reviewed  
and scanned

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  
FEB 22 2018  
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. NMNM110838
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. NMNM137368
Contact: KAY MADDOX E-Mail: KAY_MADDOX@EOGRESOURCES.COM		8. Lease Name and Well No. AUDACIOUS BTL 19 FEDERAL COM 4H
3. Address PO BOX 2267 MIDLAND, TX 79702	3a. Phone No. (include area code) Ph: 432-686-3658	9. API Well No. 30-025-43865
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 19 T25S R33E Mer At surface NESE 2589FSL 955FEL 32.115825 N Lat, 103.605454 W Lon Sec 19 T25S R33E Mer At top prod interval reported below NESE 2072FSL 945FEL 32.114402 N Lat, 103.605424 W Lon Sec 30 T25S R33E Mer At total depth SESE 238FSL 915FEL 32.094848 N Lat, 103.605338 W Lon		10. Field and Pool, or Exploratory WC025G09S253309A;UP WC
11. Sec., T., R., M., or Block and Survey or Area Sec 19 T25S R33E Mer		12. County or Parish LEA
13. State NM		17. Elevations (DF, KB, RT, GL)* 3436 GL
14. Date Spudded 10/04/2017	15. Date T.D. Reached 11/28/2017	16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 02/02/2018
18. Total Depth: MD 19714 TVD 12319	19. Plug Back T.D.: MD 19613 TVD 12318	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 J-55	40.5	0	1090		975		0	
9.875	7.625 HCP-110	29.7	0	11611	4686	3120		0	
6.750	5.500 ECP-110	23.0	0	19704		780		10678	

## 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	12590	19613	12590 TO 19613	3.130	1488	OPEN PRODUCING
B)						
C)						
D)						

## 26. Perforation Record

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

Depth Interval	Amount and Type of Material
12590 TO 19613	FRAC W/17,601,620 LBS PROPPANT;290,899 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
02/02/2018	02/10/2018	24	→	2122.0	4292.0	6230.0	42.0		FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
42/64	SI	2475.0	→				2023	POW	

## 28a. Production - Interval B

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

Pending BLM approvals will  
subsequently be reviewed  
and scanned

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

ELECTRONIC SUBMISSION #405251 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):	31. Formation (Log) Markers
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.	

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
RUSTLER	934				
T/SALT	1264				
B/SALT	4694				
BRUSHY CANYON	7594				
1ST BONE SPRING SAND	10049				
2ND BONE SPRING SAND	10544				
3RD BONE SPRING SAND	11731				
WOLFCAMP	12173				

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 #405251 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 02/21/2018

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