

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-025-45369                                                                        |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>State NM VB-0647                                                    |
| 7. Lease Name or Unit Agreement Name<br>Caravan 28 State Com                                        |
| 8. Well Number 601H                                                                                 |
| 9. OGRID Number<br>7377                                                                             |
| 10. Pool name or Wildcat<br>96682 Trieste Draw; Bone Spring, East                                   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3524'                                         |

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
EOG Resources, Inc.

3. Address of Operator  
P.O. Box 2267, Midland, Texas 79702

4. Well Location  
Unit Letter N : 100 feet from the South line and 1740 feet from the West line  
Section 33 Township 24S Range 33E NMPM County: Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3524'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

EOG respectfully requests an amendment to our approved surface commingling order PLC-502 to add the following wells to the Convoy Central CTB:

|                           |              |                                              |
|---------------------------|--------------|----------------------------------------------|
| Caravan 28 State Com 601H | 30-025-45369 | (96682) Trieste Draw; Bone Spring, East      |
| Caravan 28 State Com 701H | 30-025-45370 | (98092) WC-025 G-09 S243336I; Upper Wolfcamp |
| Caravan 28 State Com 702H | 30-025-45371 | (98092) WC-025 G-09 S243336I; Upper Wolfcamp |
| Caravan 28 State Com 703H | 30-025-45372 | (98092) WC-025 G-09 S243336I; Upper Wolfcamp |
| Convoy 28 State Com 606H  | 30-025-44259 | (96682) Trieste Draw; Bone Spring, East      |
| Convoy 28 State Com 705H  | 30-025-44274 | (98092) WC-025 G-09 S243336I; Upper Wolfcamp |

Attached please find the C-102 plats for these wells and an updated facility diagram.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Sarah Mitchell TITLE Regulatory Contractor DATE 1/29/19

Type or print name Sarah Mitchell E-mail address: sarah\_mitchell@eogresources.com PHONE: 432-848-9133

**For State Use Only**

APPROVED BY: [Signature] TITLE Engineering Manager DATE 1-30-2019  
Conditions of Approval (if any):

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

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FORM C-102  
Revised August 1, 2011  
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District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                          |                                                    |                                 |                                                          |
|------------------------------------------|----------------------------------------------------|---------------------------------|----------------------------------------------------------|
| <sup>1</sup> API Number<br>30-025- 45369 |                                                    | <sup>2</sup> Pool Code<br>96682 | <sup>3</sup> Pool Name<br>Triste Draw; Bone Spring, East |
| <sup>4</sup> Property Code<br>322918     | <sup>5</sup> Property Name<br>CARAVAN 28 STATE COM |                                 | <sup>6</sup> Well Number<br>#601H                        |
| <sup>7</sup> GRID No.<br>7377            | <sup>8</sup> Operator Name<br>EOG RESOURCES, INC.  |                                 | <sup>9</sup> Elevation<br>3524'                          |

<sup>10</sup>Surface Location

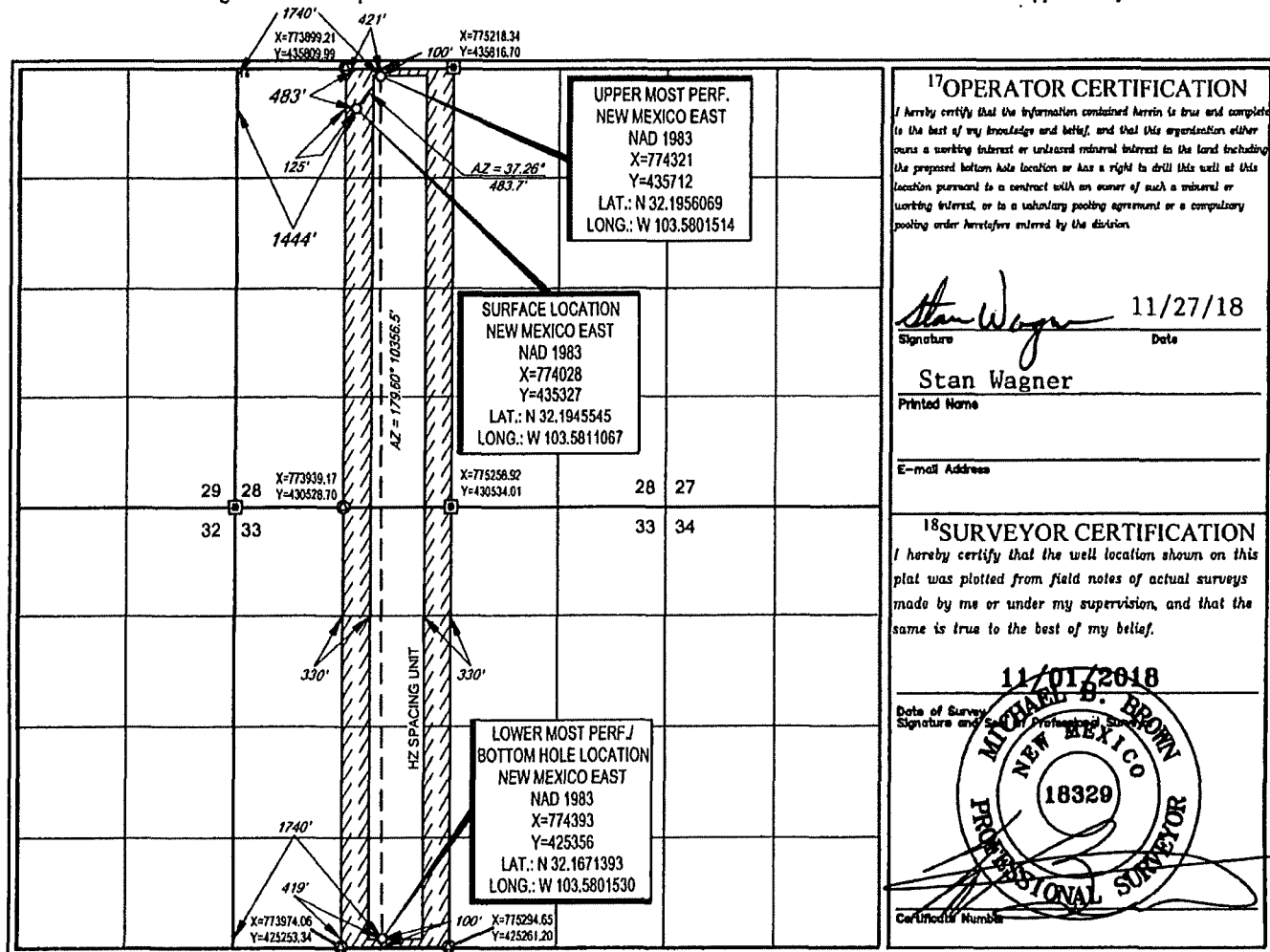
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| C             | 28      | 24-S     | 33-E  | -       | 483'          | NORTH            | 1444'         | WEST           | LEA    |

<sup>11</sup>Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| N             | 33      | 24-S     | 33-E  | -       | 100'          | SOUTH            | 1740'         | WEST           | LEA    |

|                                      |                               |                                  |                         |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>320 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



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WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                         |                                                    |                                                                |
|-----------------------------------------|----------------------------------------------------|----------------------------------------------------------------|
| <sup>1</sup> API Number<br>30-025-45370 | <sup>2</sup> Pool Code<br>98092                    | <sup>3</sup> Pool Name<br>WC-025 G-09 S243336I; Upper Wolfcamp |
| <sup>4</sup> Property Code<br>322918    | <sup>5</sup> Property Name<br>CARAVAN 28 STATE COM | <sup>6</sup> Well Number<br>#701H                              |
| <sup>7</sup> OGRID No.<br>7377          | <sup>8</sup> Operator Name<br>EOG RESOURCES, INC.  | <sup>9</sup> Elevation<br>3519'                                |

<sup>10</sup>Surface Location

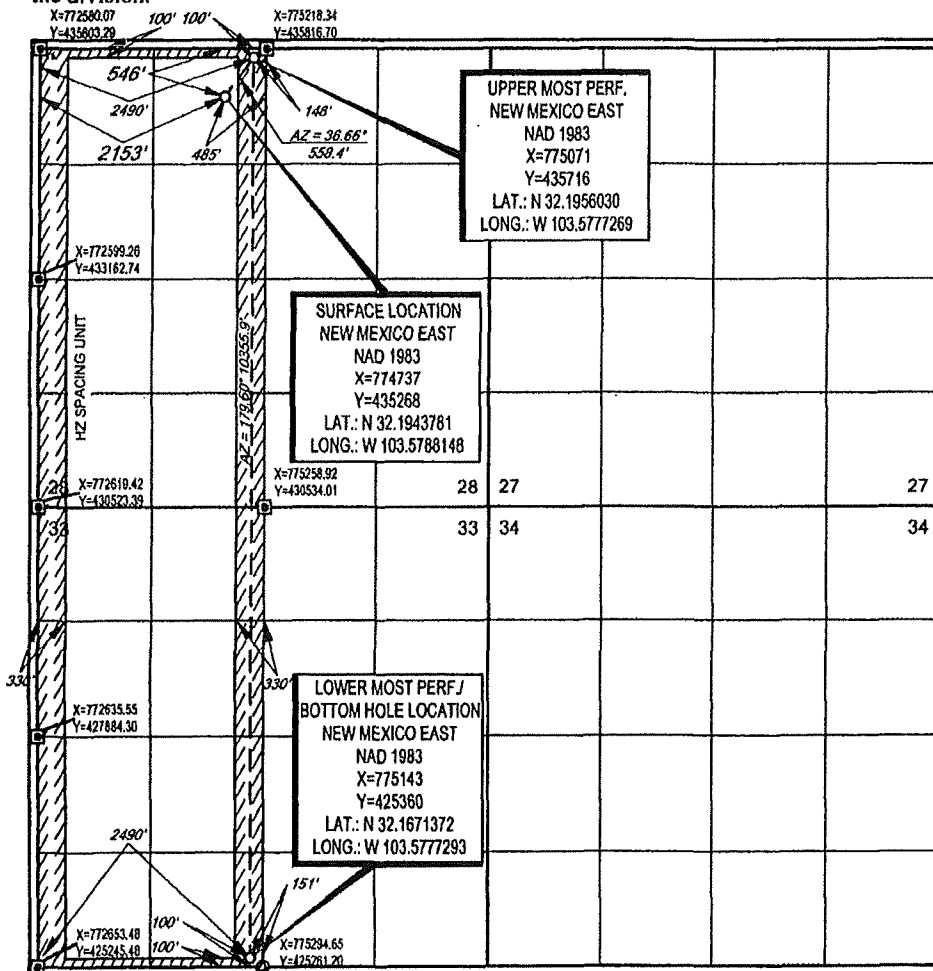
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| C             | 28      | 24-S     | 33-E  | -       | 546'          | NORTH            | 2153'         | WEST           | LEA    |

<sup>11</sup>Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| N             | 33      | 24-S     | 33-E  | -       | 100'          | SOUTH            | 2490'         | WEST           | LEA    |

|                                      |                               |                                  |                         |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>640 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



<sup>17</sup>OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: Stan Wagner Date: 11/27/18

Printed Name: Stan Wagner

E-mail Address:

<sup>18</sup>SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

Date of Survey: 11/01/2018  
Signature and Seal of Professional Surveyor: MICHAEL J. BROWN  
Professional Surveyor No. 18329  
Certificate Number:

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WELL LOCATION AND ACREAGE DEDICATION PLAT

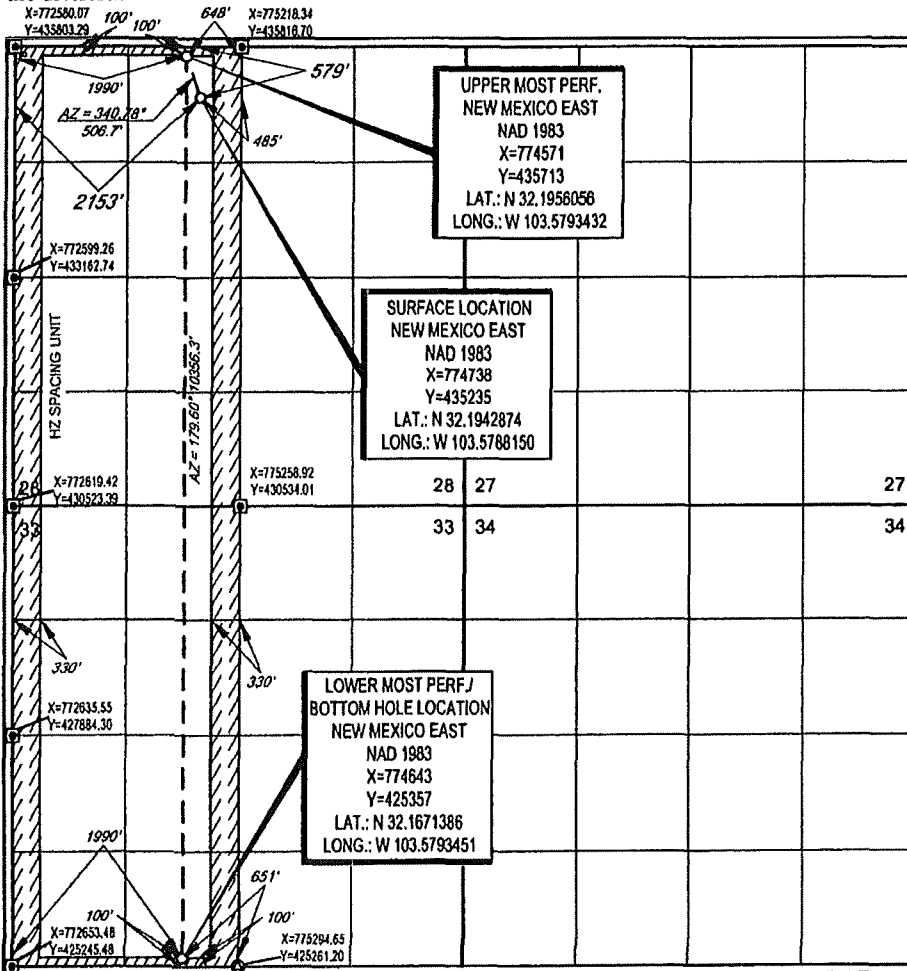
5/5

|                                         |                                                    |                                 |                                                                |
|-----------------------------------------|----------------------------------------------------|---------------------------------|----------------------------------------------------------------|
| <sup>1</sup> API Number<br>30-025-45371 |                                                    | <sup>2</sup> Pool Code<br>98092 | <sup>3</sup> Pool Name<br>WC-025 G-09 S243336I; Upper Wolfcamp |
| <sup>4</sup> Property Code<br>322918    | <sup>5</sup> Property Name<br>CARAVAN 28 STATE COM |                                 | <sup>6</sup> Well Number<br>#702H                              |
| <sup>7</sup> OGRID No.<br>7377          | <sup>8</sup> Operator Name<br>EOG RESOURCES, INC.  |                                 | <sup>9</sup> Elevation<br>3518'                                |

| <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 |
| C                              | 28      | 24-S     | 33-E  | -       | 579'          | NORTH            | 2153'         | WEST           | LEA    |

| <sup>11</sup> Bottom Hole Location If Different From Surface |         |                               |       |                                  |               |                         |               |                |        |
|--------------------------------------------------------------|---------|-------------------------------|-------|----------------------------------|---------------|-------------------------|---------------|----------------|--------|
| UL or lot no.                                                | Section | Township                      | Range | Lot Idn                          | Feet from the | North/South line        | Feet from the | East/West line | County |
| N                                                            | 33      | 24-S                          | 33-E  | -                                | 100'          | SOUTH                   | 1990'         | WEST           | LEA    |
| <sup>12</sup> Dedicated Acres<br>640                         |         | <sup>13</sup> Joint or Infill |       | <sup>14</sup> Consolidation Code |               | <sup>15</sup> Order No. |               |                |        |

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| <sup>17</sup> OPERATOR CERTIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |
| I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. |                  |
| Signature<br><i>Stan Wagner</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Date<br>11/27/18 |
| Printed Name<br>Stan Wagner                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |
| E-mail Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                  |
| <sup>18</sup> SURVEYOR CERTIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |
| I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.                                                                                                                                                                                                                                                                                                        |                  |
| Date of Survey<br>11/01/2018                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  |
| Signature and Seal of Professional Surveyor<br><i>Michael E. Brown</i>                                                                                                                                                                                                                                                                                                                                                                                                                                   |                  |
| Certificate Number<br>18329                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |

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FORM C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                         |                                                    |                                                                |
|-----------------------------------------|----------------------------------------------------|----------------------------------------------------------------|
| <sup>1</sup> API Number<br>30-025-45772 | <sup>2</sup> Pool Code<br>98092                    | <sup>3</sup> Pool Name<br>WC-025 G-09 S243336I; Upper Wolfcamp |
| <sup>4</sup> Property Code<br>722918    | <sup>5</sup> Property Name<br>CARAVAN 28 STATE COM | <sup>6</sup> Well Number<br>#703H                              |
| <sup>7</sup> GRID No.<br>7377           | <sup>8</sup> Operator Name<br>EOG RESOURCES, INC.  | <sup>9</sup> Elevation<br>3525'                                |

<sup>10</sup>Surface Location

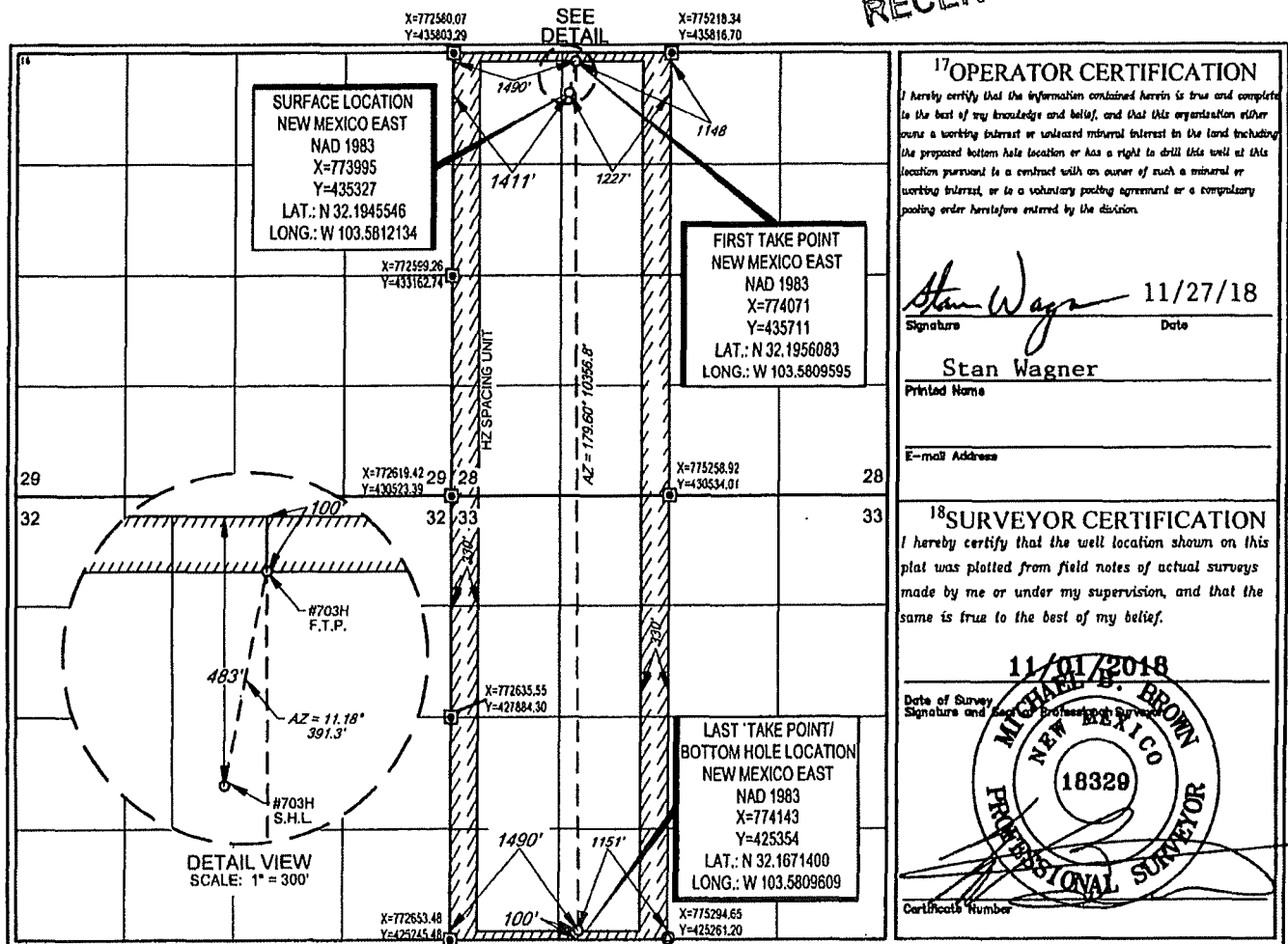
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| C             | 28      | 24-S     | 33-E  | -       | 483'          | NORTH            | 1411'         | WEST           | LEA    |

<sup>11</sup>Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| N             | 33      | 24-S     | 33-E  | -       | 100'          | SOUTH            | 1490'         | WEST           | LEA    |

|                                      |                               |                                  |                         |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>640 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|

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FORM C-102

Revised August 1, 2011

Submit one copy to appropriate

District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                         |                                                   |                                                          |
|-----------------------------------------|---------------------------------------------------|----------------------------------------------------------|
| <sup>1</sup> API Number<br>30-025-44259 | <sup>2</sup> Pool Code<br>96682                   | <sup>3</sup> Pool Name<br>Triste Draw; Bone Spring, East |
| <sup>4</sup> Property Code<br>317294    | <sup>5</sup> Property Name<br>CONVOY 28 STATE COM | <sup>6</sup> Well Number<br>#606H                        |
| <sup>7</sup> GRID No.<br>7377           | <sup>8</sup> Operator Name<br>EOG RESOURCES, INC. | <sup>9</sup> Elevation<br>3521'                          |

<sup>10</sup>Surface Location

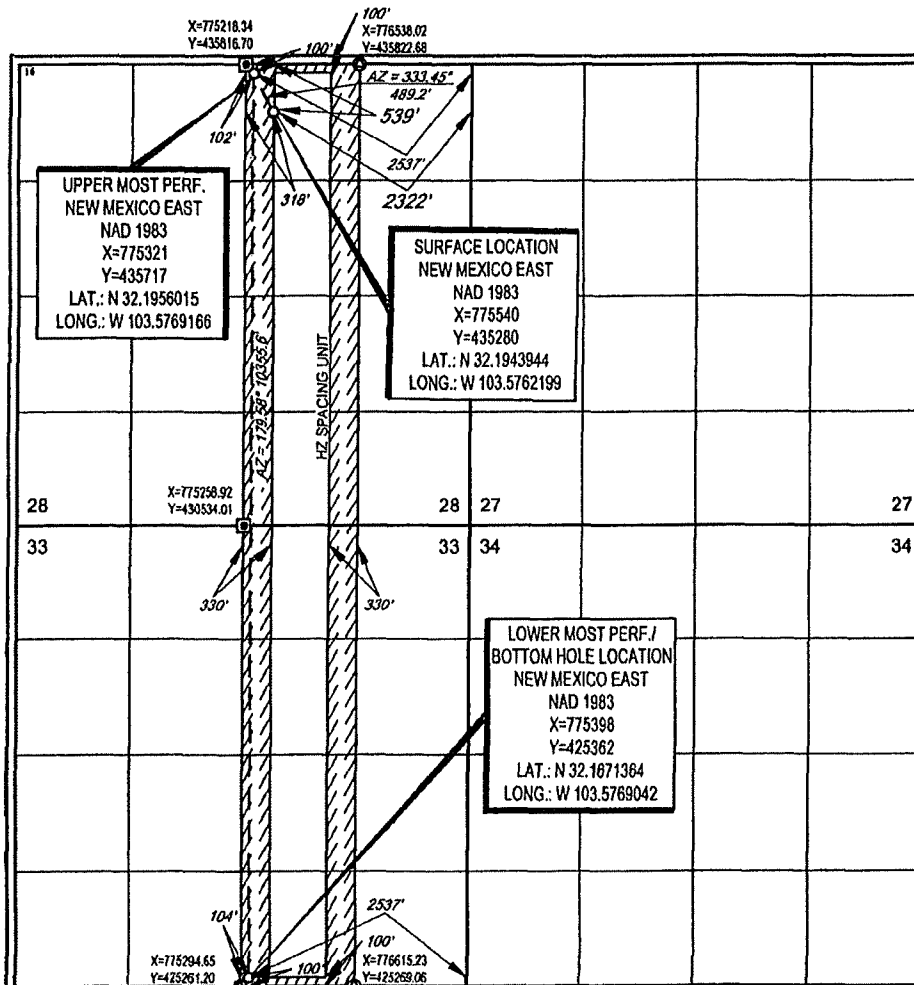
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| B             | 28      | 24-S     | 33-E  | -       | 539'          | NORTH            | 2322'         | EAST           | LEA    |

<sup>11</sup>Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| 0             | 33      | 24-S     | 33-E  | -       | 100'          | SOUTH            | 2537'         | EAST           | LEA    |

|                                      |                               |                                  |                         |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>320 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| <sup>17</sup> OPERATOR CERTIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |
| I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. |                  |
| <i>Stan Wagner</i><br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 11/29/18<br>Date |
| Stan Wagner<br>Printed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |
| E-mail Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                  |
| <sup>18</sup> SURVEYOR CERTIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |
| I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.                                                                                                                                                                                                                                                                                                        |                  |
| 11/18/2017<br>Date of Survey                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  |
| MICHAEL B. BROWN<br>NEW MEXICO<br>18329<br>PROFESSIONAL SURVEYOR                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |
| Certificate Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                  |

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WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                         |                                                   |                                                                |
|-----------------------------------------|---------------------------------------------------|----------------------------------------------------------------|
| <sup>1</sup> API Number<br>30-025-44274 | <sup>2</sup> Pool Code<br>98092                   | <sup>3</sup> Pool Name<br>WC-025 G-09 S243336I; Upper Wolfcamp |
| <sup>4</sup> Property Code<br>317294    | <sup>5</sup> Property Name<br>CONVOY 28 STATE COM | <sup>6</sup> Well Number<br>#705H                              |
| <sup>7</sup> GRID No.<br>7377           | <sup>8</sup> Operator Name<br>EOG RESOURCES, INC. | <sup>9</sup> Elevation<br>3520'                                |

<sup>10</sup>Surface Location

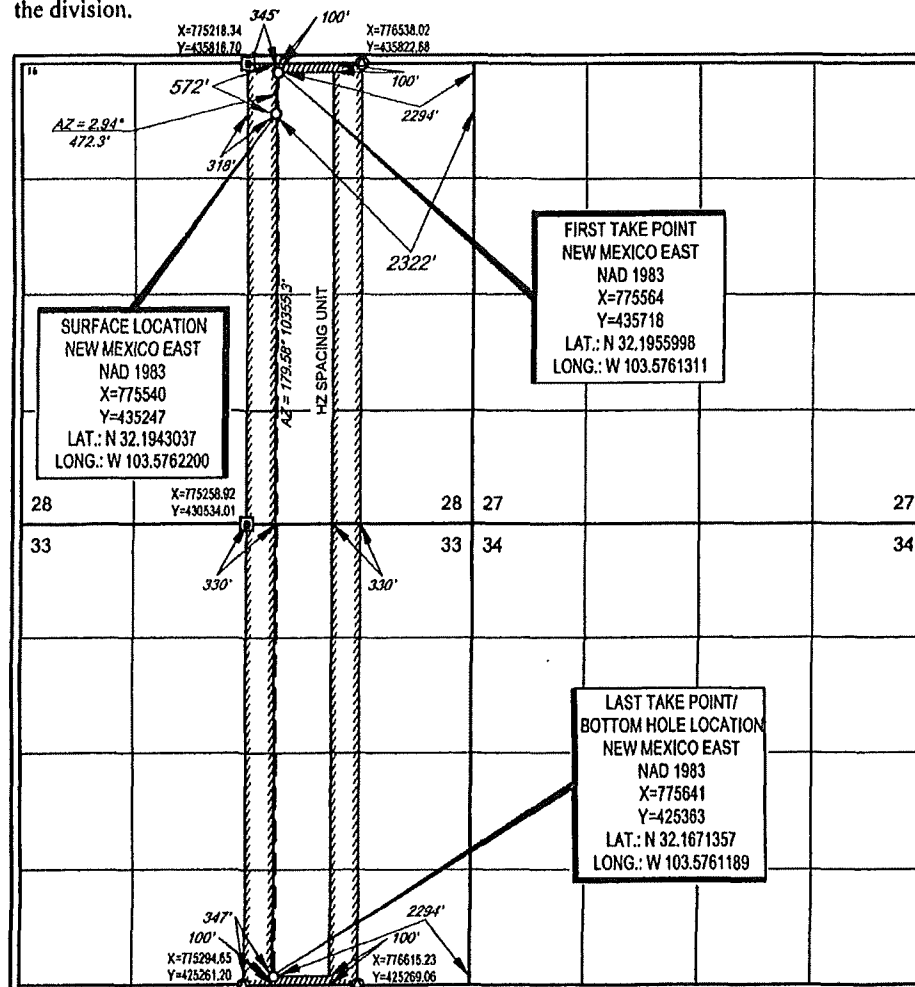
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| B             | 28      | 24-S     | 33-E  | -       | 572'          | NORTH            | 2322'         | EAST           | LEA    |

<sup>11</sup>Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| 0             | 33      | 24-S     | 33-E  | -       | 100'          | SOUTH            | 2294'         | EAST           | LEA    |

|                                      |                               |                                  |                         |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>320 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
|--------------------------------------|-------------------------------|----------------------------------|-------------------------|

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



<sup>17</sup>OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

*Stan Wagner* 11/29/18  
Signature Date

Stan Wagner  
Printed Name

E-mail Address

<sup>18</sup>SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

11/18/2017  
Date of Survey  
Signature and Seal of Professional Surveyor

MICHAEL E. BROWN  
NEW MEXICO  
18329  
PROFESSIONAL SURVEYOR  
Certificate Number

Larger, more legible copy

# FACILITY NAME: CONVOY CENTRAL CTB

