

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-8161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-8178 Fax:(505) 334-8170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3482

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-101
August 1, 2011
Permit 210905

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

1. Operator Name and Address EOG RESOURCES INC P.O. Box 2267 Midland, TX 79702		2. OGRID Number 7377
4. Property Code 315287		3. API Number 30-025-42826
5. Property Name COCKATOO 19 STATE COM		6. Well No. 502H

7. Surface Location

UL - Lot	D	Section	19	Township	21S	Range	35E	Lot Idn	D	Feet From	200	N/S Line	N	Feet From	880	E/W Line	W	County	Lea
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8. Proposed Bottom Hole Location

UL - Lot	M	Section	19	Township	21S	Range	35E	Lot Idn	M	Feet From	230	N/S Line	S	Feet From	330	E/W Line	W	County	Lea
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9. Pool Information

WILSON;BONE SPRING	64560
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Additional Well Information

11. Work Type New Well	12. Well Type OIL	13. Cable/Rotary	14. Lease Type State	15. Ground Level Elevation 3646
16. Multiple N	17. Proposed Depth 14834	18. Formation Bone Spring	19. Contractor	20. Spud Date 1/1/2016
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

☒ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	17.5	13.375	54.5	1705	900	0
Int1	12.25	9.625	40	4000	700	0
Int1	12.25	9.625	40	5000	200	0
Prod	8.75	5.5	17	14834	1975	4500

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Double Ram	3000	3000	

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable. Signature: Printed Name: Electronically filed by Stan Wagner Title: Regulatory Analyst Email Address: Stan_Wagner@eogresources.com Date: 10/5/2015	OIL CONSERVATION DIVISION Approved By: Paul Kautz Title: Geologist Approved Date: 10/6/2015 Expiration Date: 10/6/2017 Conditions of Approval Attached
Phone: 432-686-3689	

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Form C-102
August 1, 2011
Permit 210905

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-025-42826	2. Pool Code 64560	3. Pool Name WILSON;BONE SPRING
4. Property Code 315287	5. Property Name COCKATOO 19 STATE COM	6. Well No. 502H
7. OGRID No. 7377	8. Operator Name EOG RESOURCES INC	9. Elevation 3646

10. Surface Location

UL - Lot D	Section 19	Township 21S	Range 35E	Lot Idn D	Feet From 200	N/S Line N	Feet From 880	E/W Line W	County Lea
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11. Bottom Hole Location If Different From Surface

UL - Lot M	Section 19	Township 21S	Range 35E	Lot Idn M	Feet From 230	N/S Line S	Feet From 330	E/W Line W	County Lea
12. Dedicated Acres 143.36	13. Joint or Infill		14. Consolidation Code				15. 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

	<p style="text-align: center;">OPERATOR CERTIFICATION</p> <p><i>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 unleased mineral interest in the land including the proposed bottom hole location(s) 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></p> <p>E-Signed By: Stan Wagner Title: Regulatory Analyst Date: 10/5/2015</p> <hr/> <p style="text-align: center;">SURVEYOR CERTIFICATION</p> <p><i>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 and correct to the best of my belief.</i></p> <p>Surveyed By: Michael Brown Date of Survey: 9/17/2015 Certificate Number: 18329</p>
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1220 S. St Francis Dr.
Santa Fe, NM 87505

Form APD Comments

Permit 210905

PERMIT COMMENTS

Operator Name and Address: EOG RESOURCES INC [7377] P.O. Box 2267 Midland, TX 79702		API Number: 30-025-42826
		Well: COCKATOO 19 STATE COM #502H
Created By rjarratt	Comment Other attachments sent in separate email.	Comment Date 10/5/2015

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Form APD Conditions

Permit 210905

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address: EOG RESOURCES INC [7377] P.O. Box 2267 Midland, TX 79702	API Number: 30-025-42826
	Well: COCKATOO 19 STATE COM #502H

OCD Reviewer	Condition
pkautz	Once the well is spud, to prevent ground water contamination through whole or partial conduits from the surface, the operator shall drill without interruption through the fresh water zone or zones and shall immediately set in cement the water protection string
pkautz	If using a pit for drilling and completion operations, must have an approved pit from prior to spudding the well.
pkautz	1) SURFACE & INTERNEMIATE CASING - Cement must circulate to surface -- 2) PRODUCTION CASING - Cement must tie back into intermediate casing --
pkautz	If cement does not circulate to surface, must run temperature survey or other log to determine top of cement
pkautz	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water
pkautz	Must notify OCD Hobbs Office if lost circulation is encountered at 575-370-3186
pkautz	1) Must notify OCD Hobbs Office prior to running Stage Tool at 575-370-3186 2) If using Stage Tool on Surface casing, Stage Tool must be set greater than 350' from surface and a minimum of 200 feet above surface shoe. 3) When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet below previous casing shoe.