Initial

Application Part I

Received: 06/07/2019

This application is placed in file for record. It MAY or MAY NOT have been reviewed to be determined Administratively Complete

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DATE IN	107/244 SUSPEN	SE ENGINEER	LOGGED IN	0 Ling	DMAM1915857001
			ABOVE THIS LINE FOR DIVISION USE	ONLY	
		NEW MEXICO OIL (- Engine 1220 South St. Franc	eering Bureau -	a la	
		ADMINISTRATI	VE APPLICA	TION CHECK	(LIST
Ţ	THIS CHECKLIST IS M			OR EXCEPTIONS TO DIVI SION LEVEL IN SANTA FE	SION RULES AND REGULATIONS
Appli	[DHC-Dow [PC-Po	s: ndard Location] [NSP-No nhole Commingling] [C	n-Standard Proratio TB-Lease Comming - Off-Lease Storage ion] [PMX-Pressu sposal] [IPI-Inject	on Unit] [SD-Simulta lling] [PLC-Pool/Lo] [OLM-Off-Lease lire Maintenance Ex ion Pressure Increa	aneous Dedication] ease Commingling] Measurement] pansion] use]
[1]	TYPE OF AI [A]	PLICATION - Check Th Location - Spacing Unit			OLM-167
	Check [B]	Cone Only for [B] or [C] Commingling - Storage DHC CTB	- Measurement	C 🗌 OLS 🛛	
	[C]	Injection - Disposal - Pr	essure Increase - En		PPR Lell
	[D]	Other: Specify			- Rumbain
[2]	NOTIFICAT [A]	ION REQUIRED TO: - Working, Royalty of			PPR Lell - Rumble ot Apply is tate # 44 30-0 \$5-4574
	[B]	Offset Operators, L	easeholders or Surfa	ace Owner	Ped
	[C]	Application is One	Which Requires Pu	blished Legal Notice	
	[D]		Concurrent Approv ment - Commissioner of Public		-PEMASLOPICA) Permi Pemilis
	[E]	\boxtimes For all of the above	e, Proof of Notificati	on or Publication is A	Attached, and/or,
	[F]	Waivers are Attach	ed		

SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE [3] OF APPLICATION INDICATED ABOVE.

CERTIFICATION: I hereby certify that the information submitted with this application for administrative [4] approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

inn Abraha Production Acct. Asst. Title Signature

Miriam Morales

Print or Type Name

<u>5/3/19</u> Date

Miriam morales@eogresources.com e-mail Address

District I 1625 N. French Drive, Hobbs, NM 88240 District II 1301 W. Grand Ave, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St Francis Dr, Santa Fe, NM 87505 State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION 1220 S. St Francis Drive Santa Fe, New Mexico 87505 Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME:	EOG Res	ources							
OPERATOR ADDRESS:									
APPLICATION TYPE:									
Pool Commingling Lease C	Pool Commingling Lease Commingling Pool and Lease Commingling ØOff-Lease Storage and Measurement (Only if not Surface Commingled)								
LEASE TYPE: 🔲 Fee	\boxtimes	State 🗌 Fede	ral						
Is this an Amendment to exist	ing Order	? ∐Yes ⊠No If	"Yes", please include t	the appropriate C	Order No.				
Have the Bureau of Land Man	agement	(BLM) and State Land	l office SLO been not	tified in writing	of the proposed commi	ngling			
Yes No				~					
			DL COMMINGLIN s with the following in		<u>.</u>				
(1) Pool Names and Codes		Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes			
]						
(2) Are any wells producing at t				— ——					
 (3) Has all interest owners been (4) Measurement type: Mag 		•	posed commingling?	□Yes □No.					
 (4) Measurement type: Me (5) Will commingling decrease 			□No If "yes", descri	be why commingli	ing should be approved				
		· _	-						
· · · · · · · · · · · · · · · · · · ·			E COMMINCI IN						
(B) LEASE COMMINGLING Please attach sheets with the following information									
(1) Pool Name and Code.									
(2) Is all production from same source of supply? Yes No									
(3) Has all interest owners been notified by certified mail of the proposed commingling?									
(4) Measurement type: Metering Other (Specify)									
(C) POOL and LEASE COMMINGLING Please attach sheets with the following information									
(1) Complete Sections A and E.									
				~~~~					
	(D	/	ORAGE and MEA						
Please attached sheets with the following information           (1) Is all production from same source of supply? X Yes No									
(2) Include proof of notice to al									
(E) ADDITIONAL INFORMATION (for all application types) Please attach sheets with the following information									
(I) A schematic diagram of faci									
(2) A plat with lease boundaries	-		ons. Include lease numbe	ers if Federal or Sta	ate lands are involved.				
(3) Lease Names, Lease and We	an number	s, and API Numbers.							
I hereby certify that the information above is true and complete to the best of my knowledge and belief.									
SIGNATURE: A Consider TITLE: Production Acct. Asst DATE: 5/3//19									
TYPE OR PRINT NAME									

E-MAIL ADDRESS:miriam_morales@eogresources.com

Submit 1 Copy To Appropriate District	State of New Mex	tico		Form C-103			
Office District I – (575) 393-6161	Energy, Minerals and Natu	ral Resources	F	Revised August 1, 2011			
$\frac{D15111011}{1625}$ N. French Dr., Hobbs, NM 88240			WELL API NO.	~~~~~~			
District II - (575) 748-1283	OIL CONSERVATION	DIVISION	30-015-45749				
811 S. First St., Artesia, NM 88210	1220 South St. Fran	cis Dr.	5. Indicate Type of Lease	_			
<u>District III</u> - (505) 334-6178	Santa Fe, NM 87	505		EE			
1000 Rio Brazos Rd., Aztec, NM 87410	Suma 1 0, 1 11 1 0 /		6. State Oil & Gas Lease N	NO.			
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM			VO-4801				
87505							
SUNDRY NOTI	CES AND REPORTS ON WELLS		7. Lease Name or Unit Ag	reement Name			
(DO NOT USE THIS FORM FOR PROPOSALS T		O A DIFFERENT					
RESERVOIR. USE "APPLICATION FOR PERMI			Rumble State				
	ell 🛛 Other		8. Well Number 4H				
2. Name of Operator			9. OGRID Number 7377				
EOG Resource 3. Address of Operator	s, inc.		10. Pool name or Wildcat				
1	Street Artesia, NM 88210		Penasco Draw; Permo Penn				
4. Well Location							
Unit Letter <u>D</u> : 860 feet from the <u>North</u> line and <u>150</u> feet from the <u>West</u> line							
Section 28	Township 18S Range 2.	5E NMPM	County Eddy				
	11. Elevation (Show whether DR, RKB,	RT, GR, etc.)					
3567' GR							
12. Check	Appropriate Box to Indicate Na	ture of Notice, Rep	oort or Other Data				
NOTICE OF INT			BSEQUENT REPOR				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK					
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	IG OPNS.	DA 🛛			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JC	B 🗆				
OTHER: Off Lease measurement	$\boxtimes$	OTHER:		П			
	perations. (Clearly state all pertinent det		dates, including estimated da				
proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.							

EOG Resources respectfully requests administrative approval to Off Lease measure and sale gas production for this well.

The gas sales will be measured and sold at Enterprise meter #68922 located in Sec. 21-T18S-R25E. Please see attached plats and site security diagram.

All working interests owners have been notified. (see attached copies of certified mail)

The purpose of the Off lease measurement of production is in the interest of conservation, the reduction of environmental impact area, and overall emissions. It will not result in reduced royalty or improper measurement of production.

We understand that the request approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. And, we will submit within 30 days an application for right-of-way approval to the BLM's Realty Section in your office if we have not already done so.

I hereby certify that the information above is true and co	omplete to the best of my knowledge and belief.	
SIGNATURE A Grain Corales		1.10
SIGNATURE / Main / Main	TITLE Asst.Production Acct.	DATE 5/31/19
$\varphi$		
Type or print name Miriam Morales	E-mail address: Miriam_morales@eogresources.c	com PHONE: <u>575-748-4200</u>
For State Use Only		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		

# NM OIL CONSERVATION ARTESIA DISTRICT

District 1 (623 N. French Dr., 1 (7) N. French Dr., 1 (7) N. French Dr., 1 (7) N. S. (7) N. S. (7) (7) N. S. (7) N. S. (7) N. S. (7) (7) N. S. (7) N.	61 Fax: (575) 3 ia, NM 88210 13 Fax: (575) 7 d, Aztes, NM 8 78 Fax: (505) 3 r., Sania Fe, NB	93-0720 48-9720 7410 34-6170 1 87505 76-3462		OIL C	Depart ONSERVA 220 South St Santa Fe, N	Natural Resou tment TION DIVISIO Francis Dr.	<b>REC</b> DN	EIVI	H ED Submit or	FORM C-10 Revised August 1, 201 ne copy to appropriat District Offic AMENDED REPOR	i1 te
¹ API Number				² Peel Code				³ Poel Name			
30.015-45749		8				Wilder	cat; Cisco Peñasco Draw, Permo Penr			Penn	
Property Code			³ Property Name						Well Number		
322937			RUMBLE STATE				<u>4H</u>				
⁷ OGRID Ne.			² Operator Name				Elevation				
7377	7377 EOG RES			G RESOUR	CES, INC.				3567'		
					¹⁰ Surface Lo	peation					
UL or lot ze.	Section	Tewnship	Range	Let Idn	. Feet from the	North/South line	Fect from t	he	East/West line	e Ceanly	
D	28	18-S	25–E	-	860	NORTH	150		WEST	EDDY	
			11 _E	Bottom Ho	le Location If D	lfferent From Sur	face				
UL er lot me.	Section	Tewaship	Range	Lot Ida	Feet from the	Narth/South Line	Feel from t	he	East/West Ha	e County	
A	28	18-S	25-E	-	860	NORTH	<b>33</b> 0		EAST	EDDY	

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.

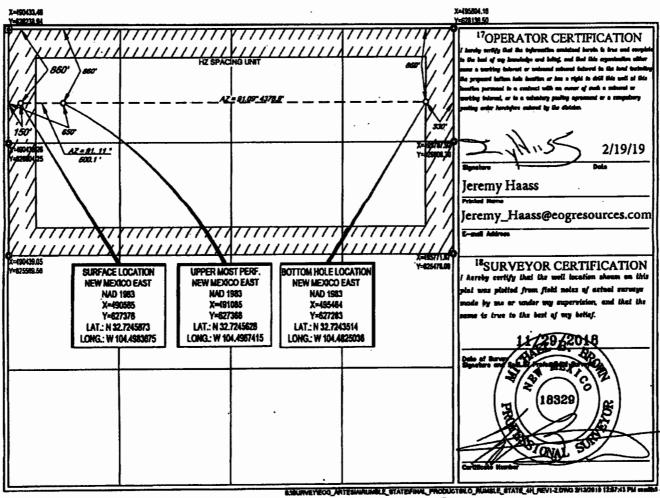
Order No.

and international Cond

Dedicated Acre

320.00

Joint or Julil



RW 2-20-19



EOG Resources, Inc. 104 South Fourth Artesia, NM 88210

May 31, 2019

RE: Off Lease Measurement Rumble State #4H Eddy County, New Mexico

Dear Interest Owner,

EOG Resources is requesting administrative approval from the Oil Conservation Division and State Land Office to Off Lease Measure and sale gas production for the above mentioned well.

The gas sales will be measured and sold at the Enterprise meter # 68922 located at Sec. 21-T18S-R25E.

The off lease measurement of production is in the interest of conservation, economic feasibility, the reduction of environmental impact area, and overall emissions. It will not reduce royalty or improper measurement of production.

We understand that the request approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. And, we will submit within 30 days an application for right-of-way approval to the BLM's Realty Section in your office if we have not already done so.

Any objections must be filed in writing with the Oil Conservation Division in Santa Fe within 20 days from the date the division received the application. Application will be sent in conjunction with notification to owners.

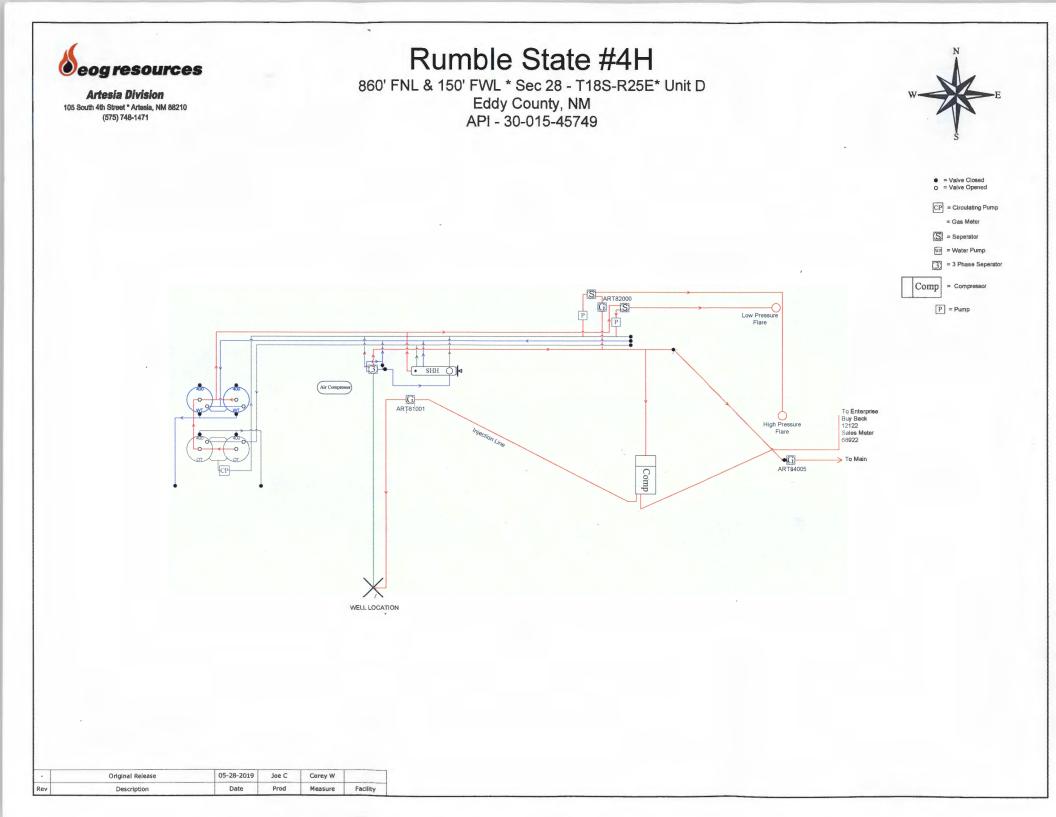
If you should have any questions, please call me at (575)748-4200 (direct line)

Sincerely,

inian florales

Miriam Morales Production Acct. Asst.

energy opportunity growth



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104 S. Fou	<b>PERVICE REQUESTED</b> Image: Street Artesia, NM 88210         575-748-1471         PIL4 L82         7014 L82         8007 Postage & Foos %         8007 Postage & Foos %         907 Postage & Foos %         908 Postage % <t< th=""><th>CERTIFIED MAIL Domestic Mail Only For delivery information, visit or Postage Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)</th><th>U.S. Postal Service Howston</th><th>-1 Company Box 4294 n, TX 77210-429</th><th>4</th></t<>	CERTIFIED MAIL Domestic Mail Only For delivery information, visit or Postage Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	U.S. Postal Service Howston	-1 Company Box 4294 n, TX 77210-429	4
4	T TOP OF ENVELOPE TO THE RIGHT ADDRESS, FOLD AT DOTTED LINE	PLACE STICKER OF THE RETURN			
÷	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELI	VERY		
	Complete items 1, 2, and 3. Also complete	A. Signature	C Agent		
	<ul> <li>item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	X	Addressee		
-	<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)	C. Date of Delivery		
<b>.</b> .	1. Article Addressed to:	D. Is delivery address different from iten if YES, enter delivery address below			
	DUV V-1 Company				
	la fax tipati				
	4.0, BUX 4294	3. Service Type			
	DXX Y-1 Company P.O. BOX 4294 Howton, TX 772/04294	A Certified Mail [®] Priority Mail	Express [™] elpt for Merchandise		
		LI Insured Mall LI Collect on L	Delivery		
	2. Article Number	4. Restricted Delivery? (Extra Fee)	Yes		
ł	(Transfer from sc 7014 1820 0000) PS Form 3811, July 2013	2958 8249			
4					

