

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 219390

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 316008		3. API Number 30-025-43154
5. Property Name BRASWELL 16 STATE		6. Well No. 708H

7. Surface Location

UL - Lot	M	Section	16	Township	26S	Range	33E	Lot Idn	M	Feet From	331	N/S Line	S	Feet From	462	E/W Line	W	County	Lea
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8. Proposed Bottom Hole Location

UL - Lot	D	Section	16	Township	26S	Range	33E	Lot Idn	D	Feet From	230	N/S Line	N	Feet From	330	E/W Line	W	County	Lea
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9. Pool Information

WC-025 G-09 S263327G;UPPER WOLFCAMP	98097
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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 3273
16. Multiple N	17. Proposed Depth 17123	18. Formation Wolfcamp	19. Contractor	20. Spud Date 6/1/2016
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	14.75	10.75	40.5	875	575	0
Int1	9.875	7.625	29.7	8000	1500	0
Int2	8.75	7.625	29.7	10900	1500	0
Prod	6.75	5.5	23	17123	575	10400

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Double Ram	10000	5000	

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 ☒ and/or 19.15.14.9 (B) NMAC ☒ , if applicable. Signature: Printed Name: Electronically filed by Stan Wagner Title: Regulatory Analyst Email Address: Stan_Wagner@eogresources.com Date: 4/12/2016	OIL CONSERVATION DIVISION Approved By: Paul Kautz Title: Geologist Approved Date: 4/14/2016 Expiration Date: 4/14/2018 Conditions of Approval Attached
Phone: 432-686-3689	

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Form C-102
August 1, 2011
Permit 219390

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-025-43154	2. Pool Code 98097	3. Pool Name WC-025 G-09 S263327G;UPPER WOLFCAMP
4. Property Code 316008	5. Property Name BRASWELL 16 STATE	6. Well No. 708H
7. OGRID No. 7377	8. Operator Name EOG RESOURCES INC	9. Elevation 3273

10. Surface Location

UL - Lot M	Section 16	Township 26S	Range 33E	Lot Idn M	Feet From 331	N/S Line S	Feet From 462	E/W Line W	County Lea
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11. Bottom Hole Location If Different From Surface

UL - Lot D	Section 16	Township 26S	Range 33E	Lot Idn D	Feet From 230	N/S Line N	Feet From 330	E/W Line W	County Lea
12. Dedicated Acres 160.00	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

	OPERATOR CERTIFICATION <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> E-Signed By: Stan Wagner Title: Regulatory Analyst Date: 4/12/2016 SURVEYOR CERTIFICATION <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> Surveyed By: Michael Brown Date of Survey: 4/7/2016 Certificate Number: 18329
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Form APD Comments

Permit 219390

PERMIT COMMENTS

Operator Name and Address: EOG RESOURCES INC [7377] P.O. Box 2267 Midland, TX 79702	API Number: 30-025-43154
	Well: BRASWELL 16 STATE #708H

Created By	Comment	Comment Date
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Form APD Conditions

Permit 219390

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address: EOG RESOURCES INC [7377] P.O. Box 2267 Midland, TX 79702	API Number: 30-025-43154
	Well: BRASWELL 16 STATE #708H

OCD Reviewer	Condition
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