

State of New Mexico  
Energy, Minerals and Natural Resources Department

Submit electronically  
Via E-permitting

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

## Seismicity Response Protocol Information Form

This form must be completed as part of OCD's Seismicity Response Protocol and updated after any qualifying event thereafter.

**Applicability:** This form must be completed for each well classified as an Underground Injection Control (UIC) Class II disposal wells or Class II enhanced recovery injection well with active injection authority (wells). "Active injection authority" means a well that is authorized to inject pursuant to an administrative permit or hearing order. This includes wells that have an approved Application for Permit to Drill and have an approved injection permit but have not yet been drilled or commenced injection.

### Well Information

**I. Operator:** EOG Resources, Inc. **OGRID:** 7377 **OCD notification date** 1/24/22

**Well Name** Hat Mesa State #10 **API#** 30-025-30534

**II. Type of Notification:** ☒ Original ☐ Amendment ☐ Other

If Other, please describe: \_\_\_\_\_

**III. Seismic event information:** Magnitude 3.2 Location 32.41320 lat, -103.5923 long., Date of occurrence 11/13/21  
Source of information (i.e. USGS, NMTSO, TexNet, other) USGS Depth of occurrence 3.1 miles

**IV. Well(s):** Provide the following information for each well permitted within a 10-mile proximity of the epicenter.

Injection Order	Distance from epicenter	Perforated and/or open-hole interval (Vertical Depth)	Formation/s completed
SWD-509-0	9.9	5310-5574'	SWD; DELAWARE [96100]

**V.** ☒ An updated well bore diagram is required to be attached, which identifies the current injection intervals (perforations and/or open hole), formation tops, measured depth, vertical depths and Sub-Sea True vertical depths.

**VI. Well Information Prior to Injection Volume Reduction:** Provide the following information for each well identified in Section IV. Daily rates and pressures are based on the active injection days during the prior 6-month period.

Avg daily injection rate (prior to reduction)	Avg injection daily pressure (prior to reduction)	Well Type (Commercial, lease only, single operator)
176 BWPD	380 psi	Single operator

**VII. Well Information After Injection Volume Reduction:** Provide the following information for each well identified in Section IV.

Avg daily injection rate limit (post reduction)	Avg injection daily pressure limit (post reduction)	Reduction %	Reduction start date	Reduction achieved date
176 BWPD	1350 psi	0	N/A	N/A

### Acknowledgments

Operator acknowledges that it must take the following actions as part of its seismic response protocol:

- ☒ Operator shall report the daily injection volumes and pressures for each well on a weekly basis on the form prescribed by the OCD. The report is due on the Wednesday the week following the weekly monitoring interval.
- ☒ Operator shall start or continue to digitally measure injection volumes and pressures for each well at a minimum of an hourly basis, and shall archive the data and make it available to OCD upon receipt of a written request.
- ☒ Operator shall monitor seismicity events with magnitudes equal to or greater than M2.5 within a radius of 10 miles around each well using USGS / NMTSO data, and shall archive the data and make it available to OCD upon receipt of a written request.
- ☒ Operator shall notify OCD and provide updated pertinent well information within 24 hours of an event greater than M 2.5 within a radius of 10 miles around each well using this OCD form.
- ☒ After each event greater than M 2.5 within a radius of 10 miles around each well, Operator shall inspect well head and well equipment of each well to ensure proper working order. As part of this inspection, Operator should evaluate whether a Bradenhead test or MIT is warranted to ensure wellbore integrity.

I certify that, after reasonable inquiry and based on the available information at the time of submittal, this Seismic Information Form is true and correct to the best of my knowledge, and I acknowledge that a false statement may be subject to civil and criminal penalties under the Oil and Gas Act.

Signature: *Sarah Mitchell*

Printed Name: Sarah Mitchell

Title: Regulatory Advisor

E-mail Address: sarah\_mitchell@eogresources.com

Date: 1/24/22

Phone: 432-848-9133

## MERIDIAN OIL

FIELD: HAT MESA

DATE SPUD: 05/24/89 PLUG: 12/30/89

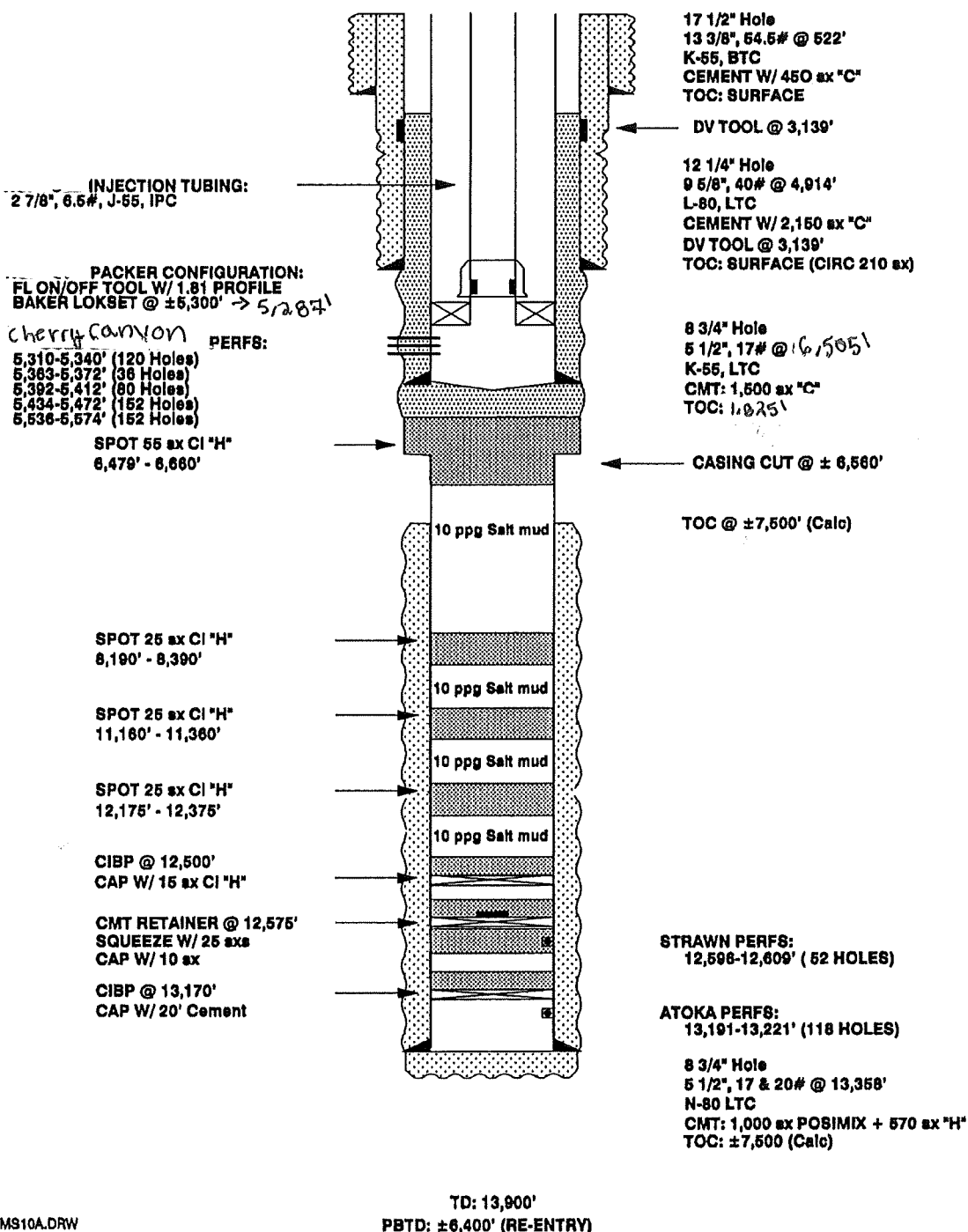
LEASE: HAT MESA STATE WELL NO. 10

ELEVATION: 3,616' G.L. / 3,839' K.B.

LOCATION: 1,980' FNL &amp; 1,420' FWL; SEC. 32, T-20-S, R-33-E

LEA COUNTY, NEW MEXICO

on cdh 1/22 per well files 8 / 26/93

HATMS10A.DRW  
02/09/93

Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/oecd/contact-us>

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DEFINITIONS

Action 173841

DEFINITIONS

Operator: EOG RESOURCES INC 5509 Champions Drive Midland, TX 79706	OGRID: 7377
	Action Number: 173841
	Action Type: [UF-SA] Seismicity Response Protocol Information (UF-SA-SRPI)

DEFINITIONS

For the sake of brevity and completeness, please allow for the following in all groups of questions and for the rest of this application: <ul style="list-style-type: none"><li>this application's operator, hereinafter "this operator".</li></ul>
This form must be completed as part of OCD's Seismicity Response Protocol and updated after any qualifying event thereafter.
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QUESTIONS

Action 173841

**QUESTIONS**

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**QUESTIONS**

<b>Prerequisites</b>	
Well	[30-025-30534] HAT MESA STATE #010

**Seismic Event Information**

The source and reference ID is required, if you would like to submit information of a new seismic event.

Source of information (i.e., USGS, NMTSO, TexNet, other)	USGS
Reference ID from source of information	us7000ftrh
Magnitude	3.2
Latitude	32.41320
Longitude	-103.59230
Date of occurrence	11/13/2021
Depth of occurrence (kilometers)	4.99

**Injection Order**

Please indicate the latest (current) injection order permitting injection for this well.

Admin Order (SWD-#)	SWD-509-0 [pDEV0020900509]
Hearing Order (R-#)	Not answered.

**Well Information**

The following information is required for each well permitted within a 10-mile proximity of the epicenter.

Distance from epicenter (miles)	9
Top perforated and/or open-hole interval (vertical depth in feet)	5,310
Bottom perforated and/or open-hole interval (vertical depth in feet)	5,574
Formation(s) completed	SWD; DELAWARE [96100]

**Well Information Prior to Injection Volume Reduction**

Daily rates and pressures are based on the active injection days during the prior 6-month period.

Average daily injection rate (BBLS per day), prior to reduction	176
Average injection daily pressure (PSI), prior to reduction	380
Well Type (i.e., Commercial, Lease Only, Single Operator)	Single Operator

**Well Information After Injection Volume Reduction**

The following information is required for each well permitted within a 10-mile proximity of the epicenter.

Required injection rate reduction percentage (0%, 25%, 50%, Shut-in)	0%
Average daily injection rate (BBLS per day) limit, post reduction	176
Average injection daily pressure (PSI) limit, post reduction	1,350
Reduction start date	11/13/2021
Reduction achieved date	11/13/2021

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**ACKNOWLEDGMENTS**

<input checked="" type="checkbox"/>	This operator acknowledges that it must take the appropriate following action(s) as part of its seismic response protocol:
<input checked="" type="checkbox"/>	This operator shall report the daily injection volumes and pressures for each well on a weekly basis on the form prescribed by the OCD. The report is due on the Wednesday the week following the weekly monitoring interval.
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<input checked="" type="checkbox"/>	I certify that, after reasonable inquiry and based on the available information at the time of submittal, this Seismic Information Form is true and correct to the best of my knowledge, and I acknowledge that a false statement may be subject to civil and criminal penalties under the Oil and Gas Act.

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CONDITIONS

Created By	Condition	Condition Date
stacy.sandoval	None	2/27/2025