

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

WELL API NO.	
30-15-46753	
5. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	
HEMLOCK 32 STATE	
8. Well Number	202H
9. OGRID Number	7377
10. Pool name or Wildcat	
TRIPLE X; BONE SPRING	

34' _____ feet from the WEST _____ line

NMPM County LEA

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

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	P AND A	<input type="checkbox"/>
CASING/CEMENT JOB	<input type="checkbox"/>		

OTHER: Completion ☒

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.

03/03/2020	Rig released
03/27/2020	MIRU prep to frac -Test void to 5000 psi, seals & flanges to 8500 psi
05/06/2020	Begin perf & frac
05/12/2020	Finish 17 stages perf & frac, 10,070-14,790' 1020 3 1/8" shots 12,272,820 lbs proppant + 248,102 bbls load fluid
06/15/2020	Drilled out plugs and clean out wellbore
08/08/2020	Opened well to flowback
08/08/2020	Date of First Production

Tubing and gas lift valves will be run within 6 months after flow back is complete. Sundry will be submitted.

Spud Date:

02/02/2020

Rig Release Date:

03/03/2020

10/27/2020 - PM NMOCD

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

SIGNATURE *Sam Muddox* TITLE Regulatory Analyst DATE 08/28/2020

Type or print name **Kay Maddox** E-mail address: **kay_maddox@eogresources.com** PHONE: **432-638-8475**

For State Use Only

APPROVED BY: PM TITLE LM II DATE 10/27/2020

Conditions of Approval (if any):