

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-105 Revised August 1, 2011 1. WELL API NO. 30-025-42039 2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.
--	---	--

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)	5. Lease Name or Unit Agreement Name Mars 10 State 6. Well Number: 503H
--	--

HOBBS OCD
 APR 17 2015
 RECEIVED

7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER	9. OGRID 7377
--	----------------------

8. Name of Operator EOG Resources, Inc. 10. Address of Operator P.O. Box 2267 Midland, TX 79702	11. Pool name or Wildcat Triple X; Bone Spring
---	--

12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	B	10	24S	33E		325	North	1360	East	Lea
BH:	B	10 3	24S	33E		235	North	1546	East	Lea

13. Date Spudded 11/10/14	14. Date T.D. Reached 11/26/14	15. Date Rig Released 11/28/14	16. Date Completed (Ready to Produce) 3/2/15	17. Elevations (DF and RKB, RT, GR, etc.) 3593' GR	
18. Total Measured Depth of Well 16215' MD - 11216' TVD		19. Plug Back Measured Depth 16096'		20. Was Directional Survey Made? Yes	21. Type Electric and Other Logs Run GR

22. Producing Interval(s), of this completion - Top, Bottom, Name 11505 - 16096', 0.39", 936 holes
--

23. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8	54.5	1345	17-1/2	1100 C	
9-5/8	40	5088	12-1/4	1450 C	
5-1/2	17	16215	8-3/4	2300 H	

24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2-7/8	11355	

26. Perforation record (interval, size, and number) 11505 - 16096', 0.39", 936 holes	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> </thead> <tbody> <tr> <td>11505 - 16096'</td> <td>2110 bbls acid, 7545372 lbs proppant, 174540 bbls load</td> </tr> </tbody> </table>	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	11505 - 16096'	2110 bbls acid, 7545372 lbs proppant, 174540 bbls load
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED				
11505 - 16096'	2110 bbls acid, 7545372 lbs proppant, 174540 bbls load				

28. PRODUCTION

Date First Production 3/2/15	Production Method (<i>Flowing, gas lift, pumping - Size and type pump</i>) Flowing	Well Status (<i>Prod. or Shut-in</i>) Producing					
Date of Test 3/9/15	Hours Tested 24	Choke Size Open	Prod'n For Test Period	Oil - Bbl 1033	Gas - MCF 917	Water - Bbl. 2125	Gas - Oil Ratio 887
Flow Tubing Press.	Casing Pressure 792	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.) 42.0	

29. Disposition of Gas (<i>Sold, used for fuel, vented, etc.</i>) Sold	30. Test Witnessed By
--	------------------------------

31. List Attachments C-102, C-103, C-104, directional survey
--

32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.

33. If an on-site burial was used at the well, report the exact location of the on-site burial:
--

Latitude _____ Longitude _____ NAD 1927 1983	
<i>I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief</i>	
Signature	Printed Name Stan Wagner Title Regulatory Specialist Date 4/10/15
E-mail Address	

JUL 23 2015

