

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. 30-025-42657 2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.
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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 Dragon 36 State 6. Well Number: 704H																																	
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																																		
8. Name of Operator EOG Resources, Inc.	9. OGRID 7377																																	
10. Address of Operator P.O. Box 2267 Midland, TX 79702	11. Pool name or Wildcat WC-25 G-09 S2433361; Upper WC																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>12. Location</th> <th>Unit Ltr</th> <th>Section</th> <th>Township</th> <th>Range</th> <th>Lot</th> <th>Feet from the</th> <th>N/S Line</th> <th>Feet from the</th> <th>E/W Line</th> <th>County</th> </tr> <tr> <td>Surface:</td> <td>N</td> <td>36</td> <td>24S</td> <td>33E</td> <td></td> <td>656</td> <td>S</td> <td>1656</td> <td>W</td> <td>Lea</td> </tr> <tr> <td>BH:</td> <td>C</td> <td>36</td> <td>24S</td> <td>33E</td> <td></td> <td>230</td> <td>N</td> <td>1553</td> <td>W</td> <td>Lea</td> </tr> </table>	12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County	Surface:	N	36	24S	33E		656	S	1656	W	Lea	BH:	C	36	24S	33E		230	N	1553	W	Lea	
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13. Date Spudded 08/19/15	14. Date T.D. Reached 09/07/15	15. Date Rig Released 09/11/15	16. Date Completed (Ready to Produce) 11/25/15	17. Elevations (DF and RKB, R/L, GR, etc.) 3483' GR																														
18. Total Measured Depth of Well 17296 MD; 12457 TVD	19. Plug Back Measured Depth 17189	20. Was Directional Survey Made? Yes	21. Type Electric and Other Logs Run GR																															
22. Producing Interval(s), of this completion - Top, Bottom, Name 12792-17189; Wolfcamp																																		

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10 3/4	40.5	1275'	14 3/4	775 C	
7 5/8	29.7	10601'	9 7/8	1st stage 330 C & 230 H	DV Tool @ 5109'
				2nd stage 415 C	
5 1/2 & 5	23 & 23.2	17296	6 3/4	700 H	

24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number) 12792-17189; .039", 1434 Holes	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.	
	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
	12792 - 17189	736 bbls acid, 8,647,850 total load,
		256,447 bbls total load

PRODUCTION

28. Date First Production 11/25/15	Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing	Well Status (Prod. or Shut-in) Producing					
Date of Test 12/6/15	Hours Tested 24	Choke Size 64	Prod'n For Test Period	Oil - Bbl 1628	Gas - MCF 2981	Water - Bbl. 3191	Gas - Oil Ratio
Flow Tubing Press 0	Casing Pressure 882	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.) 45	
29. Disposition of Gas (Sold, used for fuel, vented, etc.) 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 hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief		
Signature	Printed Name Renee' Jarratt	Title Regulatory Analyst
E-mail Address		Date 12/18/15

KZ

