

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 & Natural Resources

Form C-104  
Revised August 1, 2011

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

Submit one copy to appropriate District Office

AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address EOG Resources, Inc. P.O. Box 2267 Midland, TX 79702		<sup>2</sup> OGRID Number 7377
		<sup>3</sup> Reason for Filing Code/ Effective Date NW 02/2017
<sup>4</sup> API Number 30 - 0 25-42886	<sup>5</sup> Pool Name WC-025 G-09 S253336D; Wolfcamp	<sup>6</sup> Pool Code 98094
<sup>7</sup> Property Code 39955	<sup>8</sup> Property Name Whirling Wind 14 Fed Com	<sup>9</sup> Well Number 701H

HOBBS 000  
MAR 13 2017  
RECEIVED

**II. <sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
A	14	26S	33E		4	North	556	East	Lea

**<sup>11</sup> Bottom Hole Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	2	26S	33E		2408	South	328	East	Lea

<sup>12</sup> Lse Code	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
F	Flowing				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
7377	EOG Resources, Inc.	Oil
298751	Regency Field Services LLC	Gas

**IV. Well Completion Data**

<sup>21</sup> Spud Date	<sup>22</sup> Ready Date	<sup>23</sup> TD	<sup>24</sup> PBTB	<sup>25</sup> Perforations	<sup>26</sup> DHC, MC
9/14/16	2/15/17	20017M - 12483V	19902	12766 - 19902'	
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17-1/2	13-3/8	996	915 C		
12-1/4	9-5/8	11217	920 H, 3932 C		
8-3/4	5-1/2	19997	2183 H		

**V. Well Test Data**

<sup>31</sup> Date New Oil	<sup>32</sup> Gas Delivery Date	<sup>33</sup> Test Date	<sup>34</sup> Test Length	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure
2/15/17	2/15/17	3/2/17	24		1425
<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas	<sup>41</sup> Test Method	
Open	3038	5470	5228	Flowing	

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

*Stan Wagner*

Printed name:  
Stan Wagner

Title:  
Regulatory Specialist

E-mail Address:

Date:  
03/07/2017

Phone:  
432-686-3689

OIL CONSERVATION DIVISION

Approved by:

*[Signature]*

Title:

Petroleum Engineer

Approval Date:

03/16/17

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

HOBBS OCD  
MAR 13 2017  
RECEIVED

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other			5. Lease Serial No. NMNM122621		
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____			6. If Indian, Allottee or Tribe Name		
2. Name of Operator EOG RESOURCES, INC. Contact: STAN WAGNER E-Mail: stan_wagner@eogresources.com			7. Unit or CA Agreement Name and No.		
3. Address P.O. BOX 2267 MIDLAND, TX 79702		3a. Phone No. (include area code) Ph: 432-686-3689	8. Lease Name and Well No. WHIRLING WIND 14 FED COM 701H		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NENE 4FNL 556FEL At top prod interval reported below Sec 2 T26S R33E Mer NMP At total depth NESE 2408 FSL-328FEL			9. API Well No. 30-025-42886		
14. Date Spudded 09/14/2016	15. Date T.D. Reached 10/29/2016		16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 02/15/2017		17. Elevations (DF, KB, RT, GL)* 3340 GL
18. Total Depth: MD 20017 TVD 12483	19. Plug Back T.D.: MD 19902		20. Depth Bridge Plug Set: MD TVD		
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE			22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)		

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	68.0	0	996		915		0	
12.250	9.625 P110	53.5	0	11217		4852		0	
8.750	5.500 P110	23.0	0	19997		2183		10000	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

25. Producing Intervals			26. Perforation Record			
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	12372		12766 TO 19902	0.350	1880	PRODUCING
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
12766 TO 19902	18,737,724 LBS PROPPANT; 378,417 BBLS LOAD FLUID

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
02/15/2017	03/02/2017	24	→	3038.0	5228.0	5470.0	42.0		FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
OPEN	SI	1425.0	→				1720	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
RUSTLER	855	1195	ANHYDRITE	RUSTLER	855
SALT	1195	4825	SALT	LAMAR	5100
LAMAR	5100	5128	LIMESTONE	BELL CANYON	5128
BELL CANYON	5128	6178	SANDSTONE	BONE SPRING LIME	9316
1ST BS SAND	10264	10824	SANDSTONE	1ST BS SAND	10264
2ND BS SAND	10824	11897	SANDSTONE	2ND BS SAND	10824
3ES BS SAND	11897	12372	SANDSTONE	3RD BS SAND	11897
WOLFCAMP	12372		SHALE	WOLFCAMP	12372

32. Additional remarks (include plugging procedure):

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7. Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #368960 Verified by the BLM Well Information System.  
For EOG RESOURCES, INC., sent to the Hobbs**

Name (please print) STAN WAGNER Title REGULATORY ANALYST

Signature (Electronic Submission) Date 03/07/2017

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

5. Lease Serial No.  
NMNM122621

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
WHIRLING WIND 14 FED COM 701H ✓

2. Name of Operator  
EOG RESOURCES, INC. ✓  
Contact: STAN WAGNER  
E-Mail: stan\_wagner@eogresources.com

9. API Well No.  
30-025-42886

3a. Address  
ATTN: STAN WAGNER P.O. BOX 2267  
MIDLAND, TX 79702

3b. Phone No. (include area code)  
Ph: 432-686-3689

10. Field and Pool or Exploratory Area  
WC-025 S253336D UPPER WC

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 14 T26S R33E NENE 4FNL 556FEL ✓

11. County or Parish, State  
LEA COUNTY, NM

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Production Start-up
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

11/26/16 Prep well for completion. Perform pre-frac casing test to a max pressure of 10990 psi.  
01/21/17 MIRU. Begin 32 stage completion.  
01/29/17 Finish perforating and frac.  
Perforated 12766'-19902', 0.35", 1880 holes.  
Frac w/ 18,737,724 lbs proppant; 378,417 bbls load fluid. Shut-in.  
02/11/17 RIH to drill out plugs and clean out well.  
02/13/17 Finish drill and clean out.  
02/15/17 Opened well to flowback. First production.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #367990 verified by the BLM Well Information System  
For EOG RESOURCES, INC., sent to the Hobbs**

Name (Printed/Typed) STAN WAGNER

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 02/23/2017

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office \_\_\_\_\_

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***