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|--|-----------------------|--|------------------------|---------------------------------------|---|--|---|------------------|---|---------------|--|--|
| Submit To Appropriate District Office Two Copies: District I 1625 N. French Dr., Hobbs, NM 88249 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 | | | | | | |
| | | HOBBBS OGD JUL 03 2017 RECEIVED | | 1. WELL API NO. | | 30-025-43549 | | | | | | |
| | | | | 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: | | | | 5. Lease Name or Unit Agreement Name | | | | | | | | |
| <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) | | | | CONVOY 28 STATE COM | | | | | | | | |
| 7. Type of Completion: | | | | 6. Well Number: | | | | | | | | |
| <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 | | | | 501H | | | | | | | | |
| 8. Name of Operator | | | | 9. OGRID | | | | | | | | |
| EOG RESOURCES INC | | | | 7377 | | | | | | | | |
| 10. Address of Operator | | | | 11. Pool name or Wildcat | | | | | | | | |
| PO BOX 2267 MIDLAND, TEXAS 79702 | | | | TRISTE DRAW; BONE SPRING, EAST | | | | | | | | |
| 12. Location | Unit Ltr | Section | Township | Range | Lot | Feet from the | N/S Line | Feet from the | E/W Line | County | | |
| Surface: | A | 28 | 24S | 33E | | 598 | NORTH | 1275 | EAST | LEA | | |
| BH: | P | 33 | 24S | 33E | | 330 | SOUTH | 1237 | EAST | LEA | | |
| 13. Date Spudded | 14. Date T.D. Reached | 15. Date Rig Released | | 16. Date Completed (Ready to Produce) | | 17. Elevations (DF and RKB, RT, GR, etc.) | | | | | | |
| 03/26/2017 | 05/13/2017 | 05/17/2017 | | 06/20/2017 | | 3524' GR | | | | | | |
| 18. Total Measured Depth of Well | | 19. Plug Back Measured Depth | | 20. Was Directional Survey Made? | | 21. Type Electric and Other Logs Run | | | | | | |
| MD 20,868' TVD 11,097' | | MD 20,756' | | YES | | None | | | | | | |
| 22. Producing Interval(s), of this completion - Top, Bottom, Name | | | | | | | 2ND BONE SPRING SAND 11,366-20756" | | | | | |
| 23. 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# J-55 | | 1330' | | 14 3/4" | | 1000 CL C/CIRC | | | | |
| 7 5/8" | | 29.7# ECP 110 | | 10,596' | | 8 3/4" | | 3310 CL C/CIRC | | | | |
| 5 1/2" | | 17# HCP 110 | | 20,858' | | 6 3/4" | | 1900 CLC&H CAL | | TOC 9090' | | |
| 24. LINER RECORD | | | | | | | 25. TUBING RECORD | | | | | |
| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN | SIZE | DEPTH SET | PACKER SET | | | | | |
| | | | | | | | | | | | | |
| 26. Perforation record (interval, size, and number) | | | | | | | 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. | | | | | |
| 11,366-20,756' 3 1/8", 2696 holes | | | | | | | DEPTH INTERVAL | | AMOUNT AND KIND MATERIAL USED | | | |
| | | | | | | | 11,366-20,756' | | FRAC W/25,065,120 Lbs proppant, 611,763 Bbls load fld | | | |
| 28. PRODUCTION | | | | | | | | | | | | |
| Date First Production | | Production Method (<i>Flowing, gas lift, pumping - Size and type pump</i>) | | | Well Status (<i>Prod. or Shut-in</i>) | | | | | | | |
| 06/20/2017 | | Flowing | | | Production | | | | | | | |
| Date of Test | Hours Tested | Choke Size | Prod'n For Test Period | Oil - Bbl | Gas - MCF | Water - Bbl. | Gas - Oil Ratio | | | | | |
| 06/28/2017 | 24 | 62 | | 2876 | 3957 | 7262 | 1376 | | | | | |
| Flow Tubing Press. | Casing Pressure | Calculated 24-Hour Rate | Oil - Bbl. | Gas - MCF | Water - Bbl. | Oil Gravity - API - (<i>Corr.</i>) | | | | | | |
| | 1025 | | | | | 42 | | | | | | |
| 29. Disposition of Gas (<i>Sold, used for fuel, vented, etc.</i>) | | | | | | | 30. Test Witnessed By | | | | | |
| SOLD | | | | | | | | | | | | |
| 31. List Attachments | | | | | | | C-103, C-102, C-104, Gas Capture, Directional Survey, As-drilled Plat | | | | | |
| 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 | | Title | | Date | | | | | | |
| Kay Maddox | | Kay Maddox | | Regulatory Analyst | | 06/30/2017 | | | | | | |
| E-mail Address | | | | | | | kay_maddox@eogresources.com | | | | | |

