

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 WELL API NO. 30-025-43805 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 NEPTUNE 10 STATE COM 6. Well Number: 702H																														
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 PO BOX 2267 MIDLAND, TEXAS 79702		11. Pool name or Wildcat WC025 G09 S243310P; UPPER WOLFCAMP																														
12. Location	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <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>M</td> <td>10</td> <td>24S</td> <td>33E</td> <td></td> <td>164</td> <td>SOUTH</td> <td>1182</td> <td>WEST</td> <td>LEA</td> </tr> <tr> <td>D</td> <td>03</td> <td>24S</td> <td>33E</td> <td></td> <td>231'</td> <td>NORTH</td> <td>730'</td> <td>WEST</td> <td>LEA</td> </tr> </table>	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County	M	10	24S	33E		164	SOUTH	1182	WEST	LEA	D	03	24S	33E		231'	NORTH	730'	WEST	LEA	
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13. Date Spudded 10/03/2017	14. Date T.D. Reached 12/06/2017	15. Date Rig Released 12/09/2017	16. Date Completed (Ready to Produce) 02/16/2018	17. Elevations (DF and RKB, RT, GR, etc.) 3613' GR																												
18. Total Measured Depth of Well MD 22,604' TVD 12,519'		19. Plug Back Measured Depth MD 22,495' TVD 12,513'		20. Was Directional Survey Made? YES	21. Type Electric and Other Logs Run None																											
22. Producing Interval(s), of this completion - Top, Bottom, Name WOLFCAMP 12,713-22,495'																																
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26. Perforation record (interval, size, and number) 12,713-22,495' 3 1/8" 2368 holes																																
28. PRODUCTION																																
Date First Production 02/16/2018		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 02/24/2018	Hours Tested 24	Choke Size 40	Prod'n For Test Period Oil - Bbl 1837	Gas - MCF 3454	Water - Bbl. 5591	Gas - Oil Ratio 1880																										
Flow Tubing Press. 2577	Casing Pressure 2577	Calculated 24-Hour Rate Oil - Bbl. Gas - MCF Water - Bbl.	Oil Gravity - API - (<i>Corr.</i>) 39																													
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, As-Completed 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>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 Kay Maddox		Title Regulatory Analyst	Date 02/28/2018																												
E-mail Address kay_maddox@eogresources.com																																

