

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					
<div style="position: absolute; top: 0; left: 0; font-size: 2em; color: blue; opacity: 0.5;"> HOBBS OGD MAR 12 2018 RECEIVED </div>						1. WELL API NO. 30-025-44125						2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN					
						3. State Oil & Gas Lease No.						5. Lease Name or Unit Agreement Name NEPTUNE 10 STATE COM					
						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)						6. Well Number: 602H					
WELL COMPLETION OR RECOMPLETION REPORT AND LOG																	
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 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:		N	10	24S	33E		630'	SOUTH	2197'	WEST	LEA						
BH:		C	3	24S	33E		230'	NORTH	1853'	WEST	LEA						
13. Date Spudded 10/21/2017		14. Date T.D. Reached 01/08/2018		15. Date Rig Released 01/11/2018		16. Date Completed (Ready to Produce) 02/25/2018			17. Elevations (DF and RKB, RT, GR, etc.) 3606' GR								
18. Total Measured Depth of Well MD 22,337' TVD 12,267'			19. Plug Back Measured Depth MD 22,228' TVD 12,267'			20. Was Directional Survey Made? YES			21. Type Electric and Other Logs Run None								
22. Producing Interval(s), of this completion - Top, Bottom, Name BONE SPRING 12,503-22,228'																	
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# J-55		1358'		17 1/2"		1160 SXS CL C/CIRC									
9 5/8"		40# J-55		5,106'		12 1/4"		1375 SXS CL C&H/C RC									
7 5/8"		29.7# HCP-110		11,640'		8 3/4"		815 SXS CL C&H ET OC 6,092'									
5 1/2"		20# ECP-110		22,320'		6 3/4"		1075 SXS CL H ET OC 10,610'									
24. LINER RECORD						25. TUBING RECORD											
SIZE	TOP	BOTTOM		SACKS CEMENT	SCREEN	SIZE	DEPTH SET		PACKER SET								
26. Perforation record (interval, size, and number) 12,503-22,228' 3 1/8" 2372 holes						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 12,503-22,228 Frac w/25,855,120 lbs proppant; 415,466 bbls load fld											
28. PRODUCTION																	
Date First Production 02/25/2018			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 03/03/2018	Hours Tested 24	Choke Size 40	Prod'n For Test Period	Oil - Bbl 967	Gas - MCF 2067	Water - Bbl. 5262	Gas - Oil Ratio 2137										
Flow Tubing Press.	Casing Pressure 1849	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (<i>Corr.</i>) 41											
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 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 Kay Maddox			Printed Name Kay Maddox			Title Regulatory Analyst			Date 03/09/2018								
E-mail Address kay_maddox@eogresources.com																	

