

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM118726

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.
ANTIETAM 9 FED COM 709H

9. API Well No.
30-025-44352-00-S1

10. Field and Pool, or Exploratory
WC-025 G09 S253509A

11. Sec., T., R., M., or Block and Survey
or Area Sec 9 T25S R33E Mer NMP

12. County or Parish
LEA

13. State
NM

17. Elevations (DF, KB, RT, GL)*
3427 GL

1a. Type of Well Oil Well Gas Well Dry Other
b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
Other _____

2. Name of Operator
EOG RESOURCES INC
Contact: KAY MADDOX
E-Mail: Kay_Maddox@EOGRESOURCES.com

3. Address 1111 BAGBY SKY LOBBY2
HOUSTON, TX 77002

3a. Phone No. (Area Code)
Ph: 432-686-3658

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
At surface NWNE 220FNL 1930FEL 32.151746 N Lat, 103.574997 W Lon
At top prod interval reported below NWNE 579FNL 2284FEL 32.150757 N Lat, 103.576095 W Lon
At total depth SWNE 2405FNL 2264FEL 32.131223 N Lat, 103.576095 W Lon

HOBBES OCD
SEP 13 2018
RECEIVED

14. Date Spudded
03/04/2018

15. Date T.D. Reached
04/15/2018

16. Date Completed
 D & A Ready to Prod.
07/04/2018

18. Total Depth: MD 19810
TVD 12462

19. Plug Back T.D.: MD 19705
TVD 12462

20. Depth Bridge Plug Set: MD
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
CBL

22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No 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 Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	54.5		1247		1055		0	
12.250	9.625 J55	40.0		4939		1325		0	
8.750	7.625 HCP110	29.7		11626		360		4000	
6.750	5.500 HCP110	23.0		19795		780		8976	

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	12695	19705	12695 TO 19705	3.000	1392	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
12695 TO 19705	18,028,020 LBS PROPPANT, 244,944 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
07/04/2018	07/08/2018	24	→	4042.0	8042.0	7524.0	41.0		FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
64	SI	2052.0	→	4042	8042	7524	1990	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	
	SI		→						

(See Instructions and spaces for additional data on reverse side)
ELECTRONIC SUBMISSION #427523 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED

ACCEPTED FOR RECORD
SEP - 9 2018
Wendy Myrick
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Reclamation Due: 1/4/2019

KZ

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	1075		BARREN	RUSTLER	1075
TOP OF SALT	1497		BARREN	TOP OF SALT	1710
BASE OF SALT	4699		BARREN	BASE OF SALT	4699
BRUSHY CANYON	7583		OIL & GAS	BRUSHY CANYON	7583
BONE SPRING 1ST	10083		OIL & GAS	BONE SPRING 1ST	10083
BONE SPRING 2ND	10332		OIL & GAS	BONE SPRING 2ND	10332
BONE SPRING 3RD	11845		OIL & GAS	BONE SPRING 3RD	11845
WOLFCAMP	12303		OIL & GAS	WOLFCAMP	12303

32. Additional remarks (include plugging procedure):
PLEASE REFERENCE ATTACHMENTS

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 #427523 Verified by the BLM Well Information System.

For EOG RESOURCES INC, sent to the Hobbs

Committed to AFMSS for processing by DUNCAN WHITLOCK on 07/31/2018 (18DW0222SE)

Name (please print) KAY MADDOX Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 07/17/2018

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.

**** REVISED ** REVISED ****

District I
1625 N French Dr, Hobbs, NM 88240
Phone (575) 393-6161 Fax (575) 393-9720
District II
511 S First St., Artesia, NM 88210
Phone (575) 748-1283 Fax (575) 748-9720
District III
1000 Rue Brazos Road, Aztec, NM 87410
Phone (505) 334-6178 Fax (505) 334-6170
District IV
1220 S St. Francis Dr., Sante Fe, NM 87505
Phone (505) 476-3430 Fax (505) 476-3452

State of New Mexico
Energy, Minerals & Natural Resources
Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Sante Fe, NM 87505

FORM C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025- 44352	² Pool Code 98180	³ Pool Name WC-025 G-09 S253309A; Upper Wolfcamp
⁴ Property Code 317131	⁵ Property Name ANTIETAM 9 FED COM	
⁷ OGRID No. 7377	⁸ Operator Name EOG RESOURCES, INC.	⁶ Well Number #709H
		⁹ Elevation 3427'

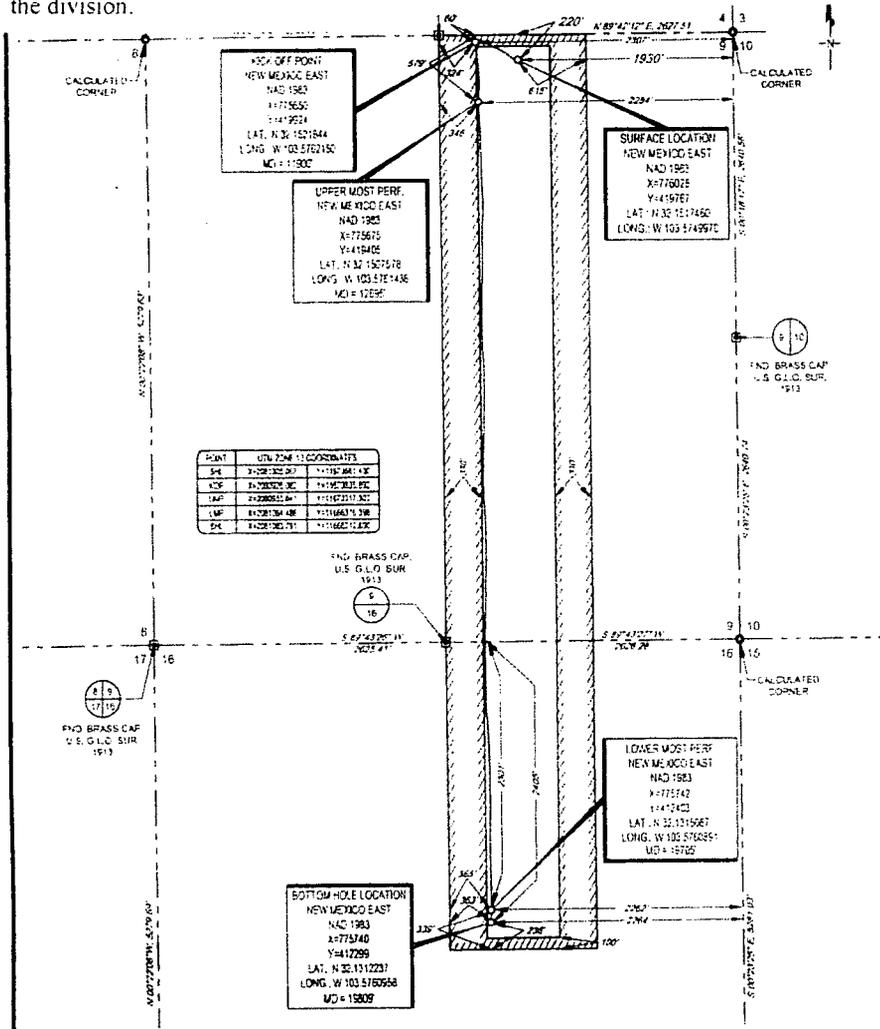
¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	9	25-S	33-E	-	220'	NORTH	1930'	EAST	LEA

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	16	25-S	33-E	-	2405'	NORTH	2264'	EAST	LEA

¹² Dedicated Acres 240.00	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or released mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: *Kay Maddox* Date: *7/17/17*
KAY MADDOX
 Printed Name

E-mail Address

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief.

Date of Survey: *12/22/2015*
 Signature: *Michael Brown*
MICHAEL BROWN
 18329
 PROFESSIONAL SURVEYOR

Certificate Number