

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						<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <b>Conservation Division</b> 220 South St. Francis Dr. Santa Fe, NM 87505						Form C-105 Revised August 1, 2011					
						1. WELL API NO. <span style="float: right;">30-025- 45138</span>											
						2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN											
						3. State Oil & Gas Lease No.											
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>																	
4. Reason for filing: <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (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 <b>HEARTTHROB 17 STATE</b>											
						6. Well Number: <span style="float: right;">703H</span>											
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 <b>EOG RESOURCES INC</b>						9. OGRID <span style="float: right;">7377</span>											
10. Address of Operator <b>PO BOX 2267 MIDLAND, TEXAS 79702</b>						11. Pool name or Wildcat <b>WC025 G09 S243310P; UPPER WOLFCAMP</b>											
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County							
Surface:	M	17	24S	33E		455'	SOUTH	1079'	WEST	LEA							
BH:	C	17	24S	33E		136'	NORTH	1540'	WEST	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.)									
02/12/2019	03/11/2019	03/13/2019			04/19/2019			3546' 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 17,470'    TVD 12,473'		MD 17,443'    TVD 12,473'			YES			None									
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>WOLFCAMP 12,750 - 17,443'</b>																	
<b>23. CASING RECORD (Report all strings set in well)</b>																	
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED							
9 5/8"		40# J-55		1,313'		12 1/4"		650 SXS CL C/CIRC									
7 5/8"		29.7# HCP -110		11,863'		8 3/4"		1453 SXS CL C/CIRC									
5 1/2"		20# ICYP 110		17,460'		6 3/4"		600 SXS CL/H TOC @ 6406' CBL									
<b>24. LINER RECORD</b>																	
SIZE	TOP	BOTTOM		SACKS CEMENT	SCREEN		<b>25. TUBING RECORD</b>										
							SIZE	DEPTH SET	PACKER SET								
26. Perforation record (interval, size, and number)						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.											
12,750 - 17,443'    3 1/8" 945 holes						DEPTH INTERVAL    AMOUNT AND KIND MATERIAL USED 12,750-17,443'    Frac w/ 12,168,040 lbs proppant; 220,039 bbls load fld											
<b>28. PRODUCTION</b>																	
Date First Production			Production Method (Flowing, gas lift, pumping - Size and type pump)					Well Status (Prod. or Shut-in)									
04/19/2019			FLOWING					PRODUCING									
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio										
04/22/2019	24	64		3172	6770	3441	2134										
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)											
	1569					41											
29. Disposition of Gas (Sold, used for fuel, vented, etc.)									30. Test Witnessed By								
SOLD																	
31. List Attachments <b>C-102, C-103, C-104, Directional Survey, As-Completed plat</b>																	
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 <i>Kay Maddox</i>			Printed Name Kay Maddox			Title Regulatory Analyst			Date 05/15/2019								
E-mail Address kay_maddox@eogresources.com																	

*KZ*

