

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address EOG RESOURCES, INC. P.O. Box 2267 Midland, TX 79702		² OGRID Number 7377
Effective 7-1-00		³ Reason for Filing Code CHANGE WELL NAME & NUMBER
⁴ API Number 30-0 25 - 32182	⁵ Pool Name Red Hills (Bone Springs)	⁶ Pool Code 51020
⁷ Property Code 26406	⁸ Property Name Red Hills North Unit (formerly - Vaca 13 Federal #2)	⁹ Well Number 302

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
B	13	25	33		660	NORTH	1880	EAST	LEA

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code F	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
037480	EOTT PIPELINE	2826303 0942110	0	U/L N SECTION 12, T-25-S, R-33-E
020809	SID RICHARDSON	2826310 0942130	G	SALES METER @ U/L C SECTION 18, T-25-S, R-34-E

IV. Produced Water

²³ POD 2826304	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBSD	²⁹ Perforations	³⁰ DHC, DC, MC
³¹ Hole Sie	³² Casing & Tubing Size	³³ Depth Set	³⁴ Sacks Cement		

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ Test Method

⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Mike Francis</i>	OIL CONSERVATION DIVISION Approved by: <i>Chris Williams</i> Title: <i>District Supervisor</i> Approval Date: <i>8/22/00</i>	
Printed name: MIKE FRANCIS		
Title: AGENT		
Date: 8/22/00	Phone: 915/686-3611	

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date