

Form 3160-4

(August 1999)

(1 original, 7 copies)

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED

OMB NO. 1004-0137

Expires: November 30, 2000

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.

3. Address

P.O. Box 2267, Midland, TX 79702

3a. Phone No. (include area code)

(915)686-3714

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At surface

660' FSL & 660' FEL

At top prod. interval reported below

At total depth

660' FSL & 660' FEL

14. Date Spudded

10/23/00

15. Date T.D. Reached

11/17/00

16. Date Completed

☐ D&A☒ Ready to Prod.

11/28/00

18. Total Depth: MD

13920

TVD

19. Plug Back T.D: MD

13879

TVD

20. Depth Bridge Plug Set: MD

TVD

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

Comp Z Densilog/Digital Acoustilog/Dual Induction

22. Was well cored?

☒ No☐ Yes (Submit analysis)

Was DST run?

☒ No☐ Yes (Submit report)

Directional Survey?

☒ No☐ Yes (Submit report)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft)	Top (MD)	Bottom (MD)	State Cementer Depth	No of Sks & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14-3/4"	11-3/4 H40	42		672		450 sx Prem Plu	193	Circ	
11"	8-5/8 HCK55/J	32		4972		1200 sx Interfill "C"	464	Circ	
7-7/8"	5-1/2 P110	17		12916		1025 sx Prem	456	4473'	
4-3/4"	2-7/8 P110	6.5		13912		140 sx Prem	28	12170	

24. Tubing Record

Size	Depth Set	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set MD	Packer Depth (MD)
	(MD)							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf Status
A) Wolfcamp			13768-69-70			
B)			13620-13650		15	120 deg phased w/predator charge
C)						
D)						

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

Depth Interval	Amount and Type of Material
13620-13650	Spotted 500 gals acid, 35000 gals foamed ZCA acid/25% CO2
13768-69-70	

28. Production - Interval A

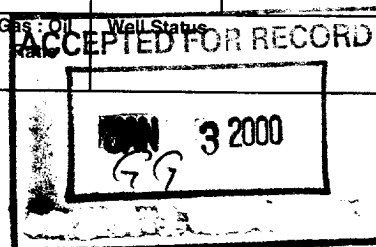
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
11/28/00	12/13/00	24	→	1	895	2	6.5	0.685	Flowing
Choke Size	Tbg. Press Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
64/64	275	100	→				895000	Prod	

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)

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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.	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)

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
				Delaware	5242
				Bone Spring	9280
				3rd Bone Spring	11954
				Wolfcamp	12443
				Wolfcamp Pay	13616

32. Additional remarks (include plugging procedure):

33. Circle enclosed attachments

- | | | | |
|---|--------------------|---------------|----------------|
| 1. Electrical/Mechanical Logs (1 full set req'd) | 2. Geologic Report | 3. DST Report | 4. Directional |
| 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):

Name (please print) Mike FrancisTitle AgentSignature *Mike Francis*Date 12/27/00

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.

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BUREAU OF LAND MANAGEMENT
U.S. DEPARTMENT OF THE INTERIOR

✓

44-38860-2

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District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 79335	*Pool Name Johnson Ranch (Watercamp)
*Property Code 23820	*Property Name TRISTE DRAW "3" FEDERAL		*Well Number 3
*OGRID No. 7377	*Operator Name EOG RESOURCES INC.		*Elevation 3437

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
P	3	25-S	33-E		660	SOUTH	660	EAST	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

*Dedicated Acres 1/2 820	*Joint or Infill	*Consolidation Code	*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

<p>16</p>	<p>17 OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p>Signature Mike Francis</p> <p>Printed Name Agent</p> <p>Title 1-3-00</p> <p>Date</p>
	<p>18 SURVEYOR CERTIFICATION</p> <p>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 and correct to best of my belief.</p> <p>Date of Survey MAY 22 2000</p> <p>Signature James E. Tompkins</p> <p>Printed Name James E. Tompkins</p> <p>Title REGISTERED PROFESSIONAL LAND SURVEYOR</p> <p>Certificate Number 14729</p>

** TOTAL PAGE.02 **