

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. <b>30-015-44052</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>EOG Resources, Inc.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>P.O. Box 2267 Midland, TX 79702</b>		7. Lease Name or Unit Agreement Name <b>Terlingua 23 State</b>
4. Well Location Unit Letter <b>P</b> <b>200</b> feet from the <b>South</b> line and <b>330</b> feet from the <b>East</b> line Section <b>23</b> Township <b>18S</b> Range <b>29E</b> NMPM County <b>Eddy</b>		8. Well Number <b>501H</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3449' GR</b>		9. OGRID Number <b>7377</b>
		10. Pool name or Wildcat <b>Santo Nino; Bone Spring</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

EOG Resources requests an amendment to our approved APD for this well to reflect a change in casing design as attached.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Stan Wagner*  
Stan Wagner

TITLE

Regulatory Analyst

DATE

3/21/2017

Type or print name

E-mail address:

PHONE:

432-686-3689

**For State Use Only**

APPROVED BY:

*Staff Manager*

TITLE

Staff Manager

DATE

3-21-17

Conditions of Approval (if any):

Terlingua 23 State #501H

Eddy County, New Mexico

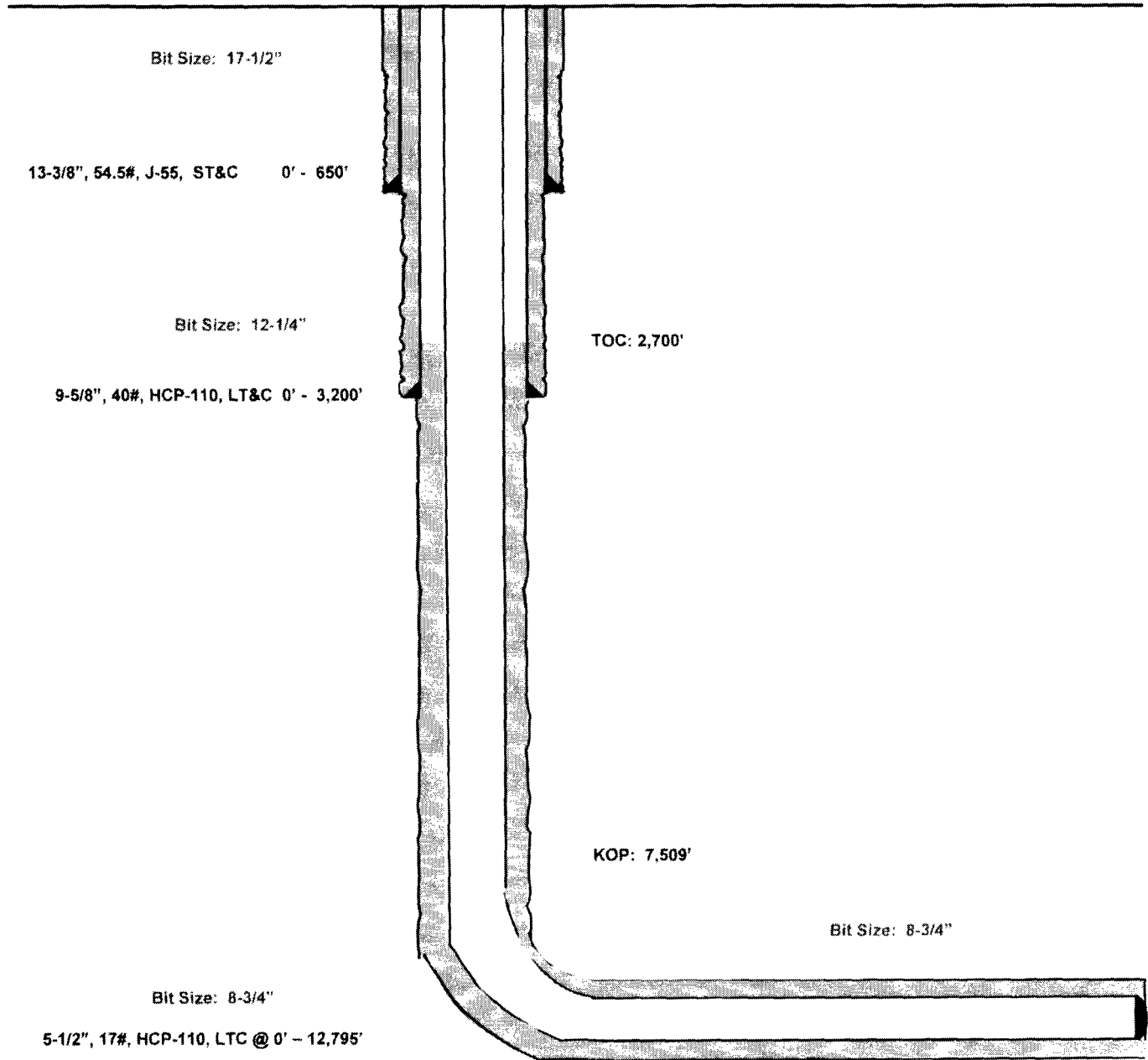
Proposed Wellbore

Revised 3/21/17

API: 30-015-44052

200' FSL  
330' FEL  
Section 23  
T-18-S, R-29-E

KB: 3,474'  
GL: 3,449'



Lateral: 12,795' MD, 7,919' TVD

BH Location: 230' FNL & 330' FEL  
Section 23  
T-18-S, R-29-E