

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. 3001545322
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 EOG Resources		6. State Oil & Gas Lease No. GOLDEN GRAHAM 1 STATE COM
3. Address of Operator PO BOX 22678 MIDLAND, TEXAS 790702		7. Lease Name or Unit Agreement Name
4. Well Location Unit Letter M : 218 feet from the SOUTH line and 699 feet from the WEST line Section 01 Township 26S Range 28E NMPM County EDDY		8. Well Number 701H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2940' GL		9. OGRID Number 7377
		10. Pool name or Wildcat PURPLE SAGE: WOLFCAMP (GAS)

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 type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: DRILLING CSG <input checked="" 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.

12/22/18 Hole 6-3/4

12/22/18

Production Casing @ ~19,634' MD, 9,650' TVD  
Run 5-1/2", 20#, ICYP-110, TXP (Airlock @ 8,764') (MJ @ 8,954')  
Lead Cement w/ 935 sx Class H (14.8 ppg, 1.18 yld)  
Test casing to 5,200 psi for 15 min - Good Did not circ cement to surface, TOC @ 7,964' by Calc  
Completion Sundry to follow

RECEIVED

JAN 07 2019

DISTRICT II-ARTESIA O.C.D.

Spud Date:

11/13/18

Rig Release Date:

12/23/18

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

SIGNATURE

TITLE

Sr. Regulatory Administrator

DATE 01/03/2019

Type or print name

Emily Follis

E-mail address:

emily\_follis@eog.com

PHONE:

432-848-9163

For State Use Only

APPROVED BY:

TITLE

Business Ops Spec

DATE

1-7-2019

Conditions of Approval (if any)