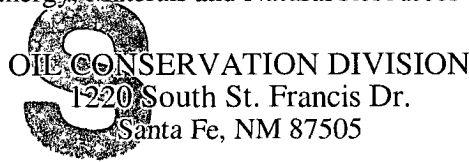


Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004



WELL API NO. 30-015-34487
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Columbia 33 Fee
8. Well Number 1H
9. OGRID Number 7377
10. Pool name or Wildcat Eagle Creek; Wolfcamp (Gas)

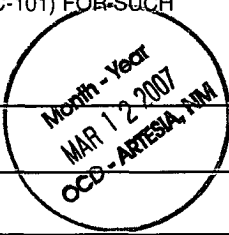
SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
EOG Resources Inc.

3. Address of Operator
P.O. Box 2267 Midland, Texas 79702

4. Well Location
 Unit Letter **I**; **1880** feet from the **South** line and **660** feet from the **East** line
 Section **33** Township **16S** Range **24E** NMPM County **Eddy**



11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3714 GR

Pit or Below-grade Tank Application or Closure
 Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
 Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: completion	<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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/09/07 **MIRU for completion.**
 Step rate tested 5 1/2" casing to 7000 psi for 30 min. Test good.

1/26/07 **Perforate from 7623' to 8230', 0.48", 24 holes.**

2/20/07 **Frac w/ 71 bbls 15% HCL acid, 602 bbls XL gel, 90000 lbs 30/70 Brown sand, 36000 lbs 16/30 White sand, 4692 bbls slick water.**
Perforate from 6700' to 7320', 0.54", 21 holes.
Frac w/ 214 bbls 15% HCL acid, 612 bbls XL gel, 89500 lbs 30/70 Brown sand, 37031 lbs 16/30 White sand, 4425 bbls slick water.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 02/28/07
 E-mail address: _____ Telephone No. **432 686 3689**

For State Use Only
 APPROVED BY BRYAN G. ARRANT TITLE DISTRICT II GEOLOGIST DATE MAR 13 2007
 Conditions of Approval, if any: