

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-039-05601

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
N/A

7. Lease Name or Unit Agreement Name

E. J. Hooten

8. Well No.

#1

9. Pool name or Wildcat

Blanco Pictured Cliffs

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 (New Mexico) Inc.

3. Address of Operator

621 17th Street, Suite 1800, Denver, CO 80293

4. Well Location

Unit Letter D : 990 Feet From The FNL Line and 990 Feet From The FWL Line

Section 12 Township 24N Range 1W NMPM Rio Arriba County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: MIT Test & TA Well ☒

12. 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.

Set 4-1/2" WL CIBP @ 2429'. Dump 2 sx cmt on CIBP @ 2429 w/Dump Bailer.

Attempted to load 4-1/2" csg w/12 BW.

Well on vacuum and within 15 mins. Braden Head quit venting. Pumped in 1BW and Braden Head vented again.

Failed MIT. Verbal waiver from NMOCC to not witness test.

Well TA'd 6/16/95.

JUN 2 1995
OIL CON. DIV.
DIST. 3

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

SIGNATURE Conni Smith TITLE Sr. Engineering Tech. DATE 6/20/95

Conni Smith

TYPE OR PRINT NAME

TELEPHONE NO. 303-293-9999

(This space for State Use)

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS INSPECTOR, DIST. # DATE JUN 22 1995

CONDITIONS OF APPROVAL, IF ANY: