

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

Form C-103
Revised July 18, 2013

WELL API NO. 30-025-43404
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Braswell 16 State Comm
8. Well Number 709H
9. OGRID Number 7377
10. Pool name or Wildcat *WC-025 G-09 S263327G; Upper Wolfcamp

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator EOG Resources, Inc.	
3. Address of Operator P.O. Box 2267 Midland, TX 79702	
4. Well Location Unit Letter D : 270 feet from the North line and 740 feet from the West line Section 16 Township 26S Range 33E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3280' GR	

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"/>	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: <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.

10/30/16 Ran 7-5/8", 29.7#, HCP110 (190) Flushmax III & (66) BTC-SC casing set at 11480'.
10/31/16 Cement w/ 600 sx Class H, 15.6 ppg, 1.19 CFS yield. WOC 4 hrs.
Cement down 10-3/4" X 7-5/8" annulus w/ 2000 sx Class C, 14.8 ppg, 1.44 CFS yield.
WOC 4 hrs. Cement w/ 76 sx Class C, 14.8 ppg, 1.44 CFS yield.
Cement to surface. WOC 8 hrs.
11/01/16 Tested casing to 2500 psi for 30 minutes. Test good.
Resumed drilling 6-3/4" hole.

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

11/02/2016

Type or print name

E-mail address:

PHONE:

432-686-3689

For State Use Only

APPROVED BY:

Mary Brown
Mary Brown

TITLE

Dist. Supervisor
Dist. Supervisor

DATE

11/17/2016

Conditions of Approval (if any):