Submit 1 Carry To Ameroprinto District	F 0.102
Submit I Copy To Appropriate District State of New Mexico	Form C-103 Revised July 18, 2013
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II – (575) 748-1283 811 S Errst St Artesia NM 88210	30-025-43403
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505	STATE X FEE
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	6. State Oil & Gas Lease No.
87505	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name BRASWELL 16 STATE COM
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	BRASWELL IN STATE COM
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other	8. Well Number 708H
2. Name of Operator	9. OGRID Number
EOG RESOURCES INC	7377
3. Address of Operator PO BOX 2267 MIDLAND, TX 79702	10. Pool name or Wildcat WC-025G-09 S263327G: Upper Wolfcamp
4. Well Location	we-ozod-og szossz7d. Opper woncamp
Unit Letter D : 270 feet from the NORTH line and 770 feet from the WEST line	
	3E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
GR 3280'	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	JOB 🗌
OTHER: OTHER: COMPLE	TION –RAN TUBING X
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	
02/18/2017 First Oil produced	bu
02/18/2017 First Oil produced 04/22/2017 MIRU to install production tubing RIH w/ 2 7/8" L-80 tubing and gas lift valves. EOT @ 12,244'	
Return well to production	
Spud Date: 11/16/2016 Rig Release 12/0	3//2016
I hereby certify that the information above is true and complete to the best of my knowledge	
Thereby certify that the another to the complete to the best of my knowledge and bench.	
Y	and belief.
Krun Maddan	•
SIGNATURE TOM Madder TITLE Regulatory Analyst	e and belief. DATE 05/01/2017
SIGNATURE <u>Maddax</u> TITLE Regulatory Analyst I Type or print name Kay Maddox E-mail address: <u>kay.maddox@eogresources.com</u>	•
Type or print name Kay Maddox E-mail address: <u>kay.maddox@eogresources.com</u>	DATE 05/01/2017 PHONE: 432-686-3658
Type or print name Kay Maddox E-mail address: <u>kay.maddox@eogresources.com</u> For State Use Only Petroleum E	DATE 05/01/2017 PHONE: 432-686-3658
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