

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

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.)		WELL API NO. 30-025-45672
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. 321651
3. Address of Operator P O BOX 2267, MIDLAND TX 79702		7. Lease Name or Unit Agreement Name SAVAGE 2 STATE COM
4. Well Location Unit Letter _____ : 496 feet from the NORTH line and 1575 feet from the WEST line Section 2 Township 25S Range 32E NMPM County LEA		8. Well Number 503H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3520' GL		9. OGRID Number 7377
		10. Pool name or Wildcat [97964] WC-025 G-07 S243225C; LWR BONE SPRIN

12. 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 ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: SHL CHANGE ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: ☐

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.

EOG request to change the SHL on the above referenced well. See attached C102 & WBD

HOBBS OCD
MAR 22 2019
RECEIVED

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

TITLE Sr. Regulatory Administrator

DATE 03/20/19

Type or print name Emily Follis

E-mail address: emily_follis@eogresources.com

PHONE: 432-848-9163

For State Use Only

APPROVED BY:

TITLE

Petroleum Engineer

DATE

03/22/19

Conditions of Approval (if any):