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| Sante Fe Main Office<br>Phone: (505) 476-3441<br><br>General Information<br>Phone: (505) 629-6116<br><br>Online Phone Directory<br><a href="https://www.emnrd.nm.gov/ocd/contact-us">https://www.emnrd.nm.gov/ocd/contact-us</a>  | <b>State of New Mexico</b><br><b>Energy, Minerals and Natural Resources</b><br><b>Oil Conservation Division</b><br><b>1220 S. St Francis Dr.</b><br><b>Santa Fe, NM 87505</b> | Form C-103<br>August 1, 2011<br><br>Permit 411920               |
|   |   | WELL API NUMBER<br>30-015-57835                                 |
|   |   | 5. Indicate Type of Lease<br>State                              |
|   |   | 6. State Oil & Gas Lease No.                                    |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)   |   | 7. Lease Name or Unit Agreement Name<br>PADRON 28 STATE WC UNIT |
| 1. Type of Well:<br>Gas   |   | 8. Well Number<br>701H  |
| 2. Name of Operator<br>EOG RESOURCES INC  |   | 9. OGRID Number<br>7377   |
| 3. Address of Operator<br>5509 Champions Drive, Midland, TX 79706   |   | 10. Pool name or Wildcat  |
| 4. Well Location<br>Unit Letter <u>O</u> : <u>704</u> feet from the <u>S</u> line and feet <u>2223</u> from the <u>E</u> line<br>Section <u>28</u> Township <u>24S</u> Range <u>27E</u> NMPM County <u>Eddy</u>   |   |   |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3308 GR  |   |   |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>  |   |   |
| Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>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"/>                          |
| TEMPORARILY ABANDON <input type="checkbox"/>  | CHANGE OF PLANS <input type="checkbox"/>  | ALTER CASING <input type="checkbox"/>                           |
| PULL OR ALTER CASING <input type="checkbox"/>   | MULTIPLE COMPL <input type="checkbox"/>   | PLUG AND ABANDON <input type="checkbox"/>                       |
| Other: _____  | Other: <u>Spud</u>  | Other: <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.  |   |   |
| 3/8/2026 Spudded well.<br><br>3/8/2026 20" CONDUCTOR SET @ 119'   |   |   |
| 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 <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> . |   |   |
| SIGNATURE <u>Electronically Signed</u>  | TITLE <u>Senior Regulatory Administrator</u>  | DATE <u>3/23/2026</u>   |
| Type or print name <u>Kristina Agee</u>   | E-mail address <u>Kristina_agee@eogresources.com</u>  | Telephone No. <u>432-686-6996</u>                               |
| <b>For State Use Only:</b>  |   |   |
| APPROVED BY: <u>Keith Dziokonski</u>  | TITLE <u>Senior Petroleum Specialist</u>  | DATE <u>3/30/2026</u>   |