Submit I Copy To Appropriate District Office District 1 - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised July 18, 2013 WELL API NO.
District II – (575) 748-1283 FEB 09 2015 CONSERVATION DIVISION District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM RECEIVED District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	30-025-42340 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
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.)	7. Lease Name or Unit Agreement Name Opal 36 State
1. Type of Well: Oil Well Gas Well Other	8. Well Number 301H
2. Name of Operator EOG Resources, Inc.	9. OGRID Number 7377
3. Address of Operator P.O. Box 2267 Midland, TX 79702	10. Pool name or Wildcat Hardin Tank; Bone Spring
4. Well Location Unit Letter O : 220 feet from the South line and 226	lect from the line
Section 36 Township 25S Range 34E 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3375' GR	NMPM County Lea
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIV PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or completed operations. (Clearly state all pertinent details, and	LLING OPNS. P AND A
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Con proposed completion or recompletion.	
 1/25/15 Spud 17-1/2" hole. Ran 23 jts 13-3/8", 54.5 #, J55 STC casing set at 1010'. 1/26/15 Cement lead w/ 630 sx Class C, 13.5 ppg, 1.76 CFS yield; tail w/ 280 sx Class C, 14.8 ppg, 1.37 CFS yield. Circulated 130 bbls cement to surface. WOC 24 hrs. Tested casing to 1500 psi for 30 minutes. Test good. 1/27/15 Resumed drilling 12-1/4" hole. 	E-PERMITTING New Well Comp
Spud Date: 1/25/15 Rig Release Date:	E-PERMITTING Comp ReComp Cancl Well
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Stan Way TITLE Regulatory Analyst	DATE
Type or print name Stan Wagner E-mail address:	PHONE: 432-686-3689
APPROVED BY: TITLE Petroleum Engineer DATE 02/09/15	