

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

Form C-103
Revised July 18, 2013

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

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|---|
| WELL API NO. 30-025-42153 |
| 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 Brown Bear 36 State |
| 8. Well Number 701H * |
| 9. OGRID Number 7377 |
| 10. Pool name or Wildcat WC-025 G-09 S5253336D; Upper WC |

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|--|--|
| 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"/> HOBBSOCD | |
| 2. Name of Operator EOG Resources, Inc. FEB 12 2015 | |
| 3. Address of Operator P.O. Box 2267 Midland, TX 79702 | |
| 4. Well Location Unit Letter D : 230 feet from the North line and 805 feet from the West line Section 36 Township 25S Range 33E NMPM County Lea | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3335' 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 checked="" 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.

1/11/15 Spud 12-1/4" hole.
1/12/15 Ran 31 jts 9-5/8", 40#, J55 LTC casing set at 1299'.
Cement lead w/ 450 sx Class C, 13.5 ppg, 1.74 yield;
tail w/ 150 sx Class C, 14.8 ppg, 1.33 yield.
Circulated 216 sx cement to surface. WOC 22 hrs.
1/13/15 Tested casing to 1500 psi for 30 minutes. Test good.
Resumed drilling 8-3/4" hole.

* CORRECTED WELL NUMBER*

Spud Date:

1/11/15

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 TITLE Regulatory Analyst DATE 01/16/2015
Type or print name Stan Wagner E-mail address: _____ PHONE: 432-686-3689
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 02/18/15
Conditions of Approval (if any): _____

FEB 18 2015

jm