	Appropriate District HOBBS OCD	HOBBS OCD State of New Mexico		Form C-103	
District I – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 CPD 10205			WELL API		
811 S. First St., A	811 S. First St., Artesia, NM 88210  District III – (505) 334-6178  1220 South St. Francis Dr.			2464 — Type of Lease	
1000 Rio Brazos I				TE FEE	
District IV – (505) 476-3460 RECEIVED Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM			6. State Oi  VB-1862	& Gas Lease No.	
87505 SUNDRY NOTICES AND REPORTS ON WELLS				ame or Unit Agreement Name	
(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.)			8. Well Nu		
Type of Well: Oil Well  Gas Well  Other      Name of Operator				9. OGRID Number	
EOG Resources, Inc.				7377 10. Pool name or Wildcat	
3. Address of Operator P.O. Box 2267 Midland, TX 79702				Bell Lake; Bone Spring, North	
4. Well Locat	ion F 2000	North	300	West	
1	Letterte	et from the line a	andfe	eet from theline	
Section	, , , , , , , , , , , , , , , , , , , ,	on (Show whether DR, RKB, RT,	NMPM GR, etc.)	County Lea	
3668' GR					
	. 12 Check Appropriate	Box to Indicate Nature of N	Jotice Report or (	Other Data	
	• • •		-		
PERFORM RE	NOTICE OF INTENTION EMEDIAL WORK   PLUG AND		SUBSEQUENT LWORK	REPORT OF:  ☐ ALTERING CASING ☐	
— — — — — — — — — — — — — — — — — — —			ICE DRILLING OPNS	.□ PANDA □	
PULL OR ALT		COMPL. CASING/	CEMENT JOB		
CLOSED-LOO		071150	5' new hole	П	
OTHER: 13. Descril	be proposed or completed operation		5' new hole tails, and give pertine	nt 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.					
09/04/2015 - Made 5' new hole. TD @ 40'. Hole size 20".					
Spud Date:	04/30/15	Rig Release Date:			
Spud Date:	04/30/13	Rig Release Date.			
11 1 20			1 1 11 11 11		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE CALL TITLE Regulatory Analyst			nalyst	DATE9/08/15	
Type or print na	Renee' Jarratt	E-mail address:		PHONE: 432-686-3684	
For State Use					
APPROVED B	Y: Accepted for Re	ecord <sub>i <b>P</b>ely</sub>		DATE	
	pproval (if any):		· · · · · · · · · · · · · · · · · · ·		