(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPL PROPOSALS.) 1. Type of Well: Oil Well 2. Name of Operator EOG Resources, Inc 3. Address of Operator		N DIVISION ncis Dr. 7505	WELL API NO. 30-025-42859 5. Indicate Type of Lea STATE 6. State Oil & Gas Leas 7. Lease Name or Unit Bridge State Ur 8. Well Number 5011 9. OGRID Number 7377 10. Pool name or Wildon	FEE
P.O. Box 2267 Midland, TX 79702 Rock Lake; Bone Spring 4. Well Location Unit Letter Section Discrete from the South Section County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3573' GR				
NOTICE OF II PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or com	Appropriate Box to Indicate NITENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL Deleted operations. (Clearly state all ork). SEE RULE 19.15.7.14 NMA completion.	SUBS REMEDIAL WORK COMMENCE DRIL CASING/CEMENT OTHER: pertinent details, and	SEQUENT REPOR ALTE LING OPNS. PANI JOB give pertinent dates, incl	RING CASING DA
1/08/16 Spud 17-1/2" hole. 1/11/16 Ran 38 jts 13-3/8", 54.5#, J55 STC casing set at 1781'. Cement lead w/ 550 sx Class C, 13.5 ppg, 1.74 CFS yield; tail w/ 200 sx Class C, 14.8 ppg, 1.34 CFS yield. Circulate 245 sx cement to surface. WOC 24+ hrs. 1/15/16 Tested casing to 2000 psi for 30 minutes. Test good. Resumed drilling 12-1/4" hole.				
Spud Date: 1/08/16	Rig Release D	ate:		
I hereby certify that the information SIGNATURE Type or print name For State Use Only APPROVED BY: Conditions of Approval (if any):	TITLE Reg	gulatory Analyst	DATE PHONE:	1/18/2016 432-686-3689 01/27/16

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