

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

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

Form C-103
Revised July 18, 2013

WELL API NO. 30-025-42971
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 Lomas Rojas 26 State Com
8. Well Number 704H
9. OGRID Number 7377
10. Pool name or Wildcat *WC-025 G-09 S253336D; Upper Wolfcamp

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator
EOG Resources, Inc. ✓

3. Address of Operator
P.O. Box 2267 Midland, TX 79702

4. Well Location
Unit Letter B : 721 feet from the North line and 2015 feet from the East line
Section 26 Township 25S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3345'

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 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.

1/17/16 Ran 239 jts 7-5/8", 29.7#, HCP110 LTC casing set at 10807'.
1/18/16 Cement lead w/ 2250 sx Class C POZ, 12.5 ppg, 1.71 CFS yield;
tail w/ 252 sx Class H, 15.6 ppg, 1.18 CFS yield.
Did not circulate to surface. Performed bradenhead squeeze between 7-5/8" casing X 10-3/4" casing
X 9-7/8" open hole. Pumped 827 sx 50/50 Class C POZ cement, 12.5 ppg, 1.71 CFS yield. WOC 31 hrs.
1/19/16 Tested casing to 1500 psi for 30 minutes. Test good.
Resumed drilling 6-3/4" hole.

Spud Date:

1/8/16

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

01/20/2016

Type or print name

Stan Wagner

E-mail address:

PHONE:

432-686-3689

For State Use Only

APPROVED BY:

P. B. Kuntz

TITLE

Petroleum Engineer

DATE

01/27/16

Conditions of Approval (if any):

FEB 02 2016 MB cy