Submit 1 Copy To Appropriate District Office	State of New Mexico			Form C-103 Revised July 18, 2013			
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748, 1282	Energy, Minerals and Natural Resources			WELL API NO. 30-025-43006	Revised July 18, 20		
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION			5. Indicate Type of La			
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	1220 South St. Francis Dr. Santa Fe, NM 87505			6. State Oil & Gas Le	FEE ase No.		
87505 SUNDRY NOT	ICES AND REPORTS ON	WELLS		7. Lease Name or Uni	it Agreement Name	-	
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI PROPOSALS.)	CATION FOR PERMIT" (FORM	C-101) FOR 5		Black Bear 36	All and the second second	1	
1. Type of Well: Oil Well 2. Name of Operator	Gas Well Other			 8. Well Number 70 9. OGRID Number 			
EOG Resources, Inc.	/	MAR	2 1 2016	7377	v	<u></u>	
3. Address of Operator P.O. Box 2267 Midla	nd, TX 79702	REC	EIVED	10. Pool name or Wile WC-025 G-09 S2533		np	
4. Well Location Unit Letter B :	250 feet from the N	lorth	line and 212	.8 feet from the	East		
Section 36	Township 25		e 33E		ounty Lea	-	
	11. Elevation (Show when 3334' GR	ther DR, RI	KB, RT, GR, etc.)			Re Com	
				1-2-11-11-11-11-11-11-11-11-11-11-11-11-			
12. Check	Appropriate Box to Indi	icate Natu	ure of Notice, R	Report or Other Dat	a		
	ITENTION TO:	_ [EQUENT REPO	and the second sec	_	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORI TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				TERING CASING] 1		
PULL OR ALTER CASING	MULTIPLE COMPL		ASING/CEMENT			,	
DOWNHOLE COMMINGLE							
OTHER:			THER:			1	
 Describe proposed or comp of starting any proposed we proposed completion or rec 	ork). SEE RULE 19.15.7.14					ate	
3/13/16 TD at 17420' M							
3/14/16 Ran 404 jts 5-1	/2", 23#, HCP110 JFE Be 5 sx 50/50 POZ H cement,			. TOC TBD.			
of to rug released.							
Spud Date: 2/25/16	Rig Re	lease Date:	3/16/16				
I hereby certify that the information	above is true and complete	to the best	of my knowledge	and belief.	a dia seconda	_	
1 de la		Decul	atom Analyst		2/17/2016		
SIGNATURE A Man W	ag	Regula	atory Analyst	DATE	3/17/2016	_	
Type or print name Stan Wagne	E-mail	address:		PHONI	E: 432-686-368	9	
For State Use Only	2ph				-1	111	
APPROVED BY: Conditions of Approval (if any):	TITLE_	Petro	leum Enginee	DATE	05/31/	16	
					11 N O-	D.M	
					NO		
						1	

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