

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
HOBBS OGD
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
OCT 19 2016
RECEIVED

Form C-103
 Revised July 18, 2013

WELL API NO. 30-025-43008	
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 Black Bear 36 State ✓	
8. Well Number 703H ✓	
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 **A** : **253** feet from the **North** line and **705** feet from the **East** line
 Section **36** Township **25S** Range **33E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3325' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p style="text-align: center;">NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/></p>	<p style="text-align: center;">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Completion <input checked="" type="checkbox"/></p>
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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.

- 4/28/16 Prep well for completion. Perform pre-frac casing test to a max pressure of 11438 psi.
- 8/02/16 MIRU for completion.
- 8/03/16 Begin 19 stage completion.
- 8/09/16 Finish perforating and frac. Perforated 12938' to 17247', 0.35", 1200 holes.
Frac w/ 480 bbls acid; 11,754,130 lbs proppant; 271,929 bbls load water
- 8/10/16 RIH to drill out plugs and clean out well.
- 8/11/16 Finish drill and clean out.
- 8/14/16 RIH w/ 5-1/2" production packer set at 12260'.
- 8/15/16 Ran 2-7/8" production tubing and gas lift assembly. EOT at 12277'. Well shut in.
- 9/19/16 Opened well for flowback.
First production.

Spud Date: 3/8/16

Rig Release Date: 3/28/16

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 9/20/2016
 Type or print name Stan Wagner E-mail address: _____ PHONE: 432-686-3689
For State Use Only

APPROVED BY: *[Signature]* TITLE Petroleum Engineer DATE 10/14/16
 Conditions of Approval (if any): _____